



LIMESTONE
UNIVERSITY
FINANCIAL AID OFFICE

2024-2025 Verification of Orphan, Ward of Court, or Foster Care Status

Student's Name: _____ Student's ID Number: _____

You indicated on your 2023-24 FAFSA that at some time since you turned age 13, you were either an orphan, a ward of the court, or were in foster care. Before we can continue processing your financial aid, you must complete this form and return it to our office by fax, email, or mail as provided at the bottom of this page.

Please check the appropriate box below. Provide any requested information and your signature.

	<p>Check here if at any time since you turned age 13 you had no living biological or adoptive parents.</p> <p>Date of parent 1's death: _____</p> <p>Date of parent 2's death: _____</p> <p>Please attach copies of both parent's death certificates and return them with this form.</p>
	<p>Check here if at any time since you turned age 13 you were in foster care, even if you are no longer in foster care today.</p> <p>Provide the following information about your foster parent(s):</p> <p>Name of foster parent(s) _____</p> <p>Address of foster parent(s) _____</p> <p>_____</p> <p>_____</p> <p>Please attach a letter/documentation from DSS office and return it with this form.</p>
	<p>Check here if at any time since you turned age 13 you were a ward of the court, even if you are no longer a ward of the court today.</p> <p>Please attach a copy of the court documents and return them with this form.</p>
	<p>Check here if none of the situations above applies to you.</p>

By signing this document, I certify that all the information reported is complete and correct. If I purposely give false or misleading information on this document, it will be cause for denial or repayment of financial aid and I may also be fined, sentenced to jail, or both.

Student Signature (Handwritten signature required)

Date