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Student ID number

## 2024-2025 Dependency Status Verification Worksheet

Name \_\_\_\_\_  
Last First Middle  
Email Address \_\_\_\_\_ Primary Phone Number \_\_\_\_\_

You indicated in the dependency status section of the Free Application for Federal Student Aid (FAFSA) that you meet one of the criteria listed below. Please verify by checking which statement below applies to you and provide the appropriate documentation. If none apply, please check the last box.

- ☐ I am subject to a legal guardianship determination within my state of residence, and I can provide court documentation verifying that I was in a legal guardianship placement immediately before the age of being an adult in my state. Reminder: the court must be located in your state of legal residence at the time the court's decision is made.
- ☐ Since I turned age 13, I have had no living biological or adoptive parents (even if you are now adopted).
- ☐ Since I turned age 13, I was in foster care (even if not in foster care today), or I was a dependent/ward of the court (even if not a ward as of today). Reminder: A student who is incarcerated is not considered a ward of the court.
- ☐ I have been declared an emancipated minor in a court in my state of legal residence.
- ☐ None of the above apply to my situation, however, I have extenuating circumstances that affect my living situation.

For each of the statuses listed, we require the following documentation:

1. Court documentation of legal guardianship, foster care, ward of the status, or emancipation.
2. If considered homeless, documentation of homeless status from high school, emergency shelter, etc.
3. Letter from the student detailing their unique situation.
4. Two additional letters of reference (from individuals who are aware of the student's situation) detailing the student's status.
5. This signed and completed form.

We will not be able to review the student's information unless all documentation above is completed. Please return all documents to Bluefield University Bluefield Central Office, 3000 College Avenue, Bluefield, VA 24605, by fax to (276)326-4356 or scanning to [bluefieldcentral@bluefield.edu](mailto:bluefieldcentral@bluefield.edu).

### Certification Statement and Signature

By signing below, I/we certify that the information provided is true and accurate. I/we understand that any false statement or misrepresentation may be cause for reduction and/or repayment of federal, state, or institutional financial aid. I/we agree to provide additional proof of information on this form.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_

\*Please note that email is not always a secure method of communication and may inadvertently expose your information if misdirected. Bluefield University suggests using fax, U.S. Postal Service or personal delivery as a more secure method of delivery. If you choose to submit information through email, Bluefield University will not be responsible for any exposure of data.