North Central State College

Financial Aid Office

ORPHAN / WARD OF THE COURT / IN GUARDIANSHIP VALIDATION

2026-2027

Name_____ NCSC I.D._____

☐ **I am an orphan; both of my parents are deceased**.
Provide copies of death certificates, obituaries, or other official documents which confirm death.

Father's name _____Date of death_____

Mother's name _____Date of death_____

Have you ever been legally adopted? ☐ Yes ☐ No If yes, for your adoptive parents:

Father's name _____Date of death_____

Mother's name _____Date of death_____

☐ **I was in <u>foster care</u> at some time after my 13th birthday**.
Provide a copy of the court decree which established foster care placement.

☐ **I was a <u>ward of the court</u> at some time after my 13th birthday**. Note that being incarcerated does not make you a ward of the court.
Provide a copy of the court decree which established wardship.

☐ **I am/was placed in <u>legal guardianship</u> by a court of law.** Note that legal custody is not the same as guardianship.
Provide a copy of the court decree which established guardianship.

☐ **I have been determined to be an <u>*emancipated minor*</u> by a court of law**.
Provide a copy of the court decree which established emancipation.

☐ **I have been determined,** as of or after July 1, 2025**, to be an <u>unaccompanied youth who is homeless</u>**.
1. If you are a <u>current</u> High School Student, please provide documentation from your high school or school district homeless liaison, OR
2. Provide documentation from the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban development.

☐ **I have been determined**, as of or after July 1, 2025, **to be an <u>unaccompanied youth who was homeless</u> or to be <u>self-supporting AND at risk of being homeless</u>.**
Provide documentation from the director of a runaway or homeless youth basic center or transitional living program.

Certification

All information I report here, and all documentation I provide to confirm what I report here, is true and complete to the best of my knowledge and belief. I understand that if I knowingly give, or allow others to give, false or misleading information to qualify me for Federal student aid, I may be fined, be sentenced to jail, or both.

Student signature_____Date_____
Handwritten signatures are required. Typed or font-based signatures will not be accepted.