

**Student Information**

Student's Name: \_\_\_\_\_

Student's Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Student's SFSC ID: \_\_\_\_\_ Phone: (\_\_\_\_) \_\_\_\_\_

According to our records, you answered yes to a question on the Free Application for Federal Student Aid (FAFSA) stating that at any time since you turned 13, both your parents were deceased, you were in foster care, or you were a dependent or ward of the court.

You should have answered "yes" to this question if at any time since you turned 13:

- You had no living parent (biological or adoptive), even if you are now adopted; or,
- You were in foster care, even if you are no longer in foster care today; or,
- You were a dependent or ward of the court, even if you are no longer a dependent or ward of the court as of today.

**Additional Information**

**Please answer the following question by checking off the statement that applies to you:**

At any time since you turned age 13, were both your parents deceased, were you in foster care or were you a dependent or ward of the court?

- ☐ Yes, since I turned 13, both my parents have been deceased.
- ☐ Yes, since I turned 13, I was in foster care.
- ☐ Yes, since I turned 13, I was dependent or ward of the court.

*If you selected any of the above statements, please attach copies of official documentation to support your claim.*

- ☐ No, I made a mistake on the FAFSA. I authorize corrections to be made on my Student Aid Report.

➤ **By signing below, the student acknowledges and confirms that the above is complete and correct.**

\_\_\_\_\_  
Print Student's Name\_\_\_\_\_  
Student's Signature\_\_\_\_\_  
Date

**Please submit all documents to:** SFSC Financial Aid Office  
600 West College Drive, Building B, Avon Park, FL 33825  
**OR** E-mail: [FinancialAid@southflorida.edu](mailto:FinancialAid@southflorida.edu)