

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.

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 to 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