



FINANCIAL AID OFFICE

50 PHELAN AVENUE • SAN FRANCISCO, CA 94112 ☎ (415) 239-3575/3576 • Fax (415) 239-3917

Must submit in person

VERIFICATION OF ORPHAN OR WARD OF THE COURT STATUS

ORPH

Name of Financial Aid Applicant			
Last Name	First	MI	Student ID

You indicated on your Free Application for Federal Student Aid (FAFSA) that both your parents are deceased, or you are a ward of the court. Please complete the appropriate section.

Orphan

Did you have no living parents (biological or adoptive) at any time since you turned age 13 even if you are **now** adopted?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

Please indicate the dates your parents passed away.

Mother: _____

Father: _____

Ward of the Court (answer **both** questions)

Were you a **dependent or ward of the court** at any time since you turned age 13?

Yes	No
<input type="checkbox"/>	<input type="checkbox"/>

The Financial Aid Office may request proof of your ward of the court status. Upon request, can you provide a court decision document granting this status?

<input type="checkbox"/>	<input type="checkbox"/>
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Foster Care (answer **both** questions)

Were you **in foster care** at any time since you turned age 13?

<input type="checkbox"/>	<input type="checkbox"/>
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The Financial Aid Office may request proof of your foster care status. Upon request, can you provide proof that you were in foster care?

<input type="checkbox"/>	<input type="checkbox"/>
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By signing this form, I certify that all the information reported is correct.

Signature of Applicant

Date

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

