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**2024 – 2025: Independent Status Review/Renewal Form**

Name: \_\_\_\_\_ CCBC ID: \_\_\_\_\_

**INSTRUCTIONS:** You reported on your FAFSA that one of the following circumstances applies to you. Select the status that best describes your situation in Section A, attach all relevant documentation, and complete Section B to indicate that you have read understood the process and your responsibilities.

**SECTION A: CIRCUMSTANCES (select one)**

➤ For your request to be considered, mark the **ONE** status that pertains to you, answer all corresponding supplemental questions, submit all required documentation, and sign and complete Section B.

**At any time since you turned 13, BOTH BIOLOGICAL OR ADOPTIVE PARENTS WERE DECEASED**

<b>Documentation</b>	<ul style="list-style-type: none"> <li> Attach a copy of your birth certificate; <u>and</u></li> <li> Attach a copy of the death certificate for each parent; <u>and</u></li> <li> Attach copy of legal adoption documentation, if applicable.</li> </ul>
<b>Supplemental Questions</b>	1. Were you legally adopted? ___ No ___ Yes *If yes, provide age at adoption: _____

**You are/were in court-appointed LEGAL GUARDIANSHIP (not custody)**

<b>Documentation</b>	<ul style="list-style-type: none"> <li> Attach copy of court papers, signed by a judge, verifying that someone other than your parent was appointed as your legal guardian (<u>not</u> custodian); <u>and</u></li> <li> Attach documentation showing that you were still with your guardian at the “age of majority” (usually 18). Documentation may include senior year high school records, medical insurance, federal or state benefit statements (Social Security, SNAP, TCA, and/or Medicaid); <u>and</u></li> <li> Attach copy of legal adoption documentation, if applicable.</li> </ul>	
<b>Supplemental Questions</b>	<p><b>SECTION 1A:</b> Review your court documentation carefully. Does it specifically award <i>guardianship</i>?</p> <p><input type="checkbox"/> No  <i>This is not the correct form for your situation. Please review and consider submitting a <a href="#">Dependency Override Request</a> for review.</i></p> <p><input type="checkbox"/> Yes  <i>Please proceed to Section B, and answer questions 1-3.</i></p>	<p><b>SECTION 1B:</b></p> <p>1. Date the court appointed your legal guardian to you: _____ / _____ month / year</p> <p>2. Name of person(s) appointed as your legal guardian(s): _____ _____</p> <p>3. Were you legally adopted? ___ No ___ Yes  If yes, provide age at adoption: _____</p>

*(Continued on Page 2)*

