

Please complete and return this form to:

**STUDENT INFORMATION:**



**Financial Aid Office**

Red Oak Center – 217  
P.O. Box 518  
Rhineland, WI 54501  
715-365-4423 or 800-544-3039  
Fax: 715-365-4918

_____	_____	_____	_____
Student's Last Name	First Name	MI	Nicolet College Student ID Number
_____			_____
Student's Street Address (incl. apt. #)			Student's Nicolet College Email
_____			(____)_____
_____	_____	_____	_____
City	State	Zip Code	Student's Home or Cell Phone Number



**Processing of your aid has stopped until this form and all required documentation is returned to the Nicolet College Financial Aid Office.**

**2018-2019 ORPHAN/FOSTERCARE/WARD OF THE COURT VERIFICATION**

You have submitted a 2018-2019 Free Application for Federal Student Aid (FAFSA) indicating that you meet the description of one or more of the student status categories listed below. To enable us to continue processing your financial aid application, please complete and return this form, along with documentation that confirms your status. If the documentation has previously been submitted, please indicate so below. If you do not meet any of the student status descriptions listed below, please update your FAFSA with your parent data or contact the Financial Aid Office for further assistance with your application.

Check the status description(s) listed below that apply to you and submit this form along with the preferred documentation to Nicolet College Financial Aid Office as soon as possible.

STUDENT STATUS	SUGGESTED DOCUMENTATION
<input type="checkbox"/> Both of my parents are deceased <b>and</b> I do not have an adoptive parent or legal guardian.	Copy of death certificates for both parents
<input type="checkbox"/> I was a Ward of the Court or had a Legal Guardian on or at any time after my 13 <sup>th</sup> birthday.	1. Court documentation OR 2. Certification from social worker
<input type="checkbox"/> I was placed in foster care and was in foster care at the age of 13 or older.	1. Court documentation OR 2. Certification from social worker
<input type="checkbox"/> I was, or am currently, in a legal guardianship as determined by a court in my state of legal residency.	1. Court documentation OR 2. Certification from social worker
<input type="checkbox"/> I am an emancipated minor.	1. Letter from you explaining circumstances under which emancipation was granted, AND 2. Court documentation
<input type="checkbox"/> I am unable to locate my parents.	1. Personal statement from you, describing your situation, AND 2. Three letters, at least one from a non-relative, verifying your relationship with your parents
<input type="checkbox"/> Documentation already on file.	
<input type="checkbox"/> None of the above applies to me and I will correct my FAFSA application to include my parental information. (NOTE: Parent will also need to sign your FAFSA application.)	

**Statement of Certification:** I certify that the information given to document my dependency status is true and complete.

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

\_\_\_\_\_  
Student Signature Date