



DEPENDENCY STATUS WORKSHEET 2024-2025

Federal regulations stipulate that student applicants provide parent/contributor information on their FAFSA to apply for federal aid, unless they meet specific federal dependency status criteria. Information on your 2024-2025 FAFSA indicated that one of the situations listed on page 2 apply to you. **Before we can continue processing your application for financial aid, check any situation that applies to you on page 2, provide potential supporting documentation listed below, and submit to our office.**

SUPPORTING DOCUMENTATION

1. Provide a copy of your marriage certificate as recorded by a court in the state in which they were married.
3. Provide a copy of your current military orders.
4. A member of the Office of Student Financial Assistance will review the FAFSA veteran's match with the VA. Please note that if no match is indicated, we may request the Member-4 copy of your DD214.
5. A member of the Office of Student Financial Assistance will review your household size and may contact you for additional follow up information as necessary.
6. Provide copies of death certificates.
- 7-8. Provide court documentation from your home state documenting your foster care or ward of the court status.
9. You must provide a copy of a court's decision that you are an emancipated minor. The court must be located in your state of legal residence.
10. A caregiver or other person with whom you are living is only considered a legal guardian if a court in your state of legal residence has established guardianship, in most cases custody does not qualify. You should check this if you can provide a copy of a court order from your home state indicating that legal guardianship was established. If you are living with a caregiver, but that caregiver is not your legal guardian as established by a court, you should not check this question.

Student Other Circumstances

11. If the student received a determination at any time after July 1, 2023, that you were unaccompanied and either (1) homeless or (2) self-supporting and at risk of being homeless, you must provide a copy of this documentation with this form. **Please provide supporting documentation showing any of the following determining the student is/was homeless or at risk of becoming homeless in your documentation:**

- Director or designee of an emergency or transitional shelter, street outreach program, homeless youth drop-in center, or other program serving those experiencing homelessness
- The student's high school or school district homeless liaison or designee
- Director or designee of a project supported by a federal TRIO or GEAR UP program grant

Student Unusual Circumstances

12. **Please provide a thorough, detailed, and signed statement explaining your circumstances along with this form.**

A student may be experiencing unusual circumstances if they:

- Left home due to an abusive or threatening environment; Are abandoned by or estranged from their parents;
- Have refugee or asylee status and are separated from their parents, or their parents are displaced in a foreign country; Are a victim of human trafficking;
- Are incarcerated, or their parents are incarcerated, and contact with the parents would pose a risk to the student; or
- Are otherwise unable to contact or locate their parents.

13. **If you cannot verify that you meet at least one of the dependency statuses on this form, or believe you made an error when completing the FAFSA, you must correct your FAFSA by changing your response to one or more of the dependency questions. You must also provide parent/contributor information on the FAFSA. Corrections may be made by going to studentaid.gov/h/apply-for-aid/fafsa.**

DEPENDENCY STATUS WORKSHEET 2024-2025

STUDENT FULL NAME: _____ CUA ID NUMBER: _____

Before we can continue processing your application for financial aid, please answer all questions on this form, check any situation that applies to you, provide supporting documentation listed on page 1, and submit to our office.

Any boxes not checked will be assumed to be NO. If none of these situations apply or you are unable to provide documentation, you may be considered Dependent for the purposes of Federal Student Aid and you may need to correct your FAFSA to include your parent(s) information. **Review page 1 for supporting documentation.**

CHECK ALL STATEMENTS THAT APPLY

1. I am married.
2. I will be pursuing a master's/doctorate degree at the beginning of the 2024-2025 school year.
3. I am currently serving on active duty in the U.S. armed forces for purposes other than training.
4. I am veteran of the U.S. armed forces.
5. I have children or other people (excluding your spouse) who live with me and receive more than half of their support from me now and between July 1, 2024, and June 30, 2025.
6. I am an orphan (no living biological or adoptive parent) **at any time since I turned 13.**
7. I am/was a ward of the court **at any time since I turned 13.**
8. I am/was in foster care **at any time since I turned 13.**
9. I am a legally emancipated minor, as determined by a court in my state of residence.
10. I am in a legal guardianship with someone other than my parent or stepparent, as determined by a court in my state of residence.
11. At any time on or after July 1, 2023, I am/was determined to be unaccompanied and either (1) homeless or (2) self-supporting and at risk of being homeless.
12. I have unusual circumstances prevent me from contacting my parents and/or contacting my parents pose a risk to my well-being.
13. I made an error on my FAFSA and none of these situations applies. I will correct my FAFSA to update these answers and include my parent/contributor(s) information.

I certify that the information on this form is complete and accurate to the best of my knowledge and belief. I understand that if I purposely give false or misleading information, I may be fined, sent to prison, or both.

STUDENT SIGNATURE: _____ DATE: _____

NOTE: signatures must be handwritten. Computer fonts not acceptable.

USE ONE OF THE FOLLOWING METHODS TO RETURN THIS FORM:

MAIL or IN-PERSON	FAX	EMAIL
Office of Student Financial Assistance Father O'Connell Hall, Suite M300 620 Michigan Avenue NE, Washington, D.C. 20064	202-319-5573	cua-faforms@cua.edu

**DEPENDENCY STATUS
WORKSHEET
2024-2025**

STUDENT FULL NAME: _____ **CUA ID NUMBER:** _____

Please provide a thorough, detailed, and signed statement describing the other or unusual circumstances indicated on page 2, if applicable. Additional documentation may be requested.

I certify that the information on this form is complete and accurate to the best of my knowledge and belief. I understand that if I purposely give false or misleading information, I may be fined, sent to prison, or both.

STUDENT SIGNATURE: _____ **DATE:** _____

NOTE: signatures must be handwritten. Computer fonts not acceptable.

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