



**INDEPENDENT STATUS FORM
VALDOSTA STATE UNIVERSITY
OFFICE OF FINANCIAL AID**

Student's Name

Student ID Number

Please check the FIRST box, which applies to you. Check only ONE box.

- I was born before January 1, 1986 (attach photocopy of your birth certificate or driver's license).
- I am married. (Attach a copy of your marriage certificate or a copy of your 2008 Federal Income Tax Returns if you filed jointly with your spouse.)
- I am a graduate or professional student, working on a master's, doctorate or other advance Degree at the beginning of the 2009-10 school year.
- I am currently serving on active duty in the U.S. Armed Forces for purposes other than training. (Attach a copy of your military orders.)
- I am a veteran of the U.S. Armed Forces. (Attach a photocopy of your DD214).
- I have children who will receive more than half of their support from me between July 1, 2009 and June 30, 2010. (Attach a copy of their birth certificates or a copy of your 2008 Federal Tax Returns if your children are listed as exemptions.)
- I have legal dependents other than my children or spouse who receive more than half of their support from me. (Please list names and ages of your dependents and attach a copy of birth certificates or a copy of your 2008 Federal Tax Returns if dependents are listed as exemptions.)
- Since my age of 13, both of my parents were deceased and I was placed in foster care or I was a dependent or ward of the court. (Attach a copy of both of your parent's death certificates or court papers attesting to ward-of-the-court status).
- I have been determined to be an emancipated minor by a court in my state of legal residency. (Attach a copy of court papers attesting to emancipated minor status).
- I have been determined to be in legal guardianship by a court in my state of legal residency. (Attach a copy of court papers attesting your legal guardianship status).
- I have been determined to be an unaccompanied youth that was homeless since July 1, 2008, by either my high school counselor, a school district homeless liaison, a Director of an emergency shelter, a Director of a runaway or homeless youth basic center or transitional living program, or transitional housing program funded by the U.S. Department of Housing and Urban Development. (Attach a statement from a) your high school counselor, b) a school district homeless liaison, c) Director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development, or d) Director of either a runaway or homeless youth basic center, e) Director of a transitional living program, or f) a transitional housing program).
- OR** I do not meet any of the above conditions. (If you check this item you are considered dependent upon your parent(s) and must provide their identity, income, and asset information to be considered for financial aid funds.)

ALL STUDENTS MUST SIGN BELOW

Student's Signature

Date

Return this completed document with any attachments as requested above to:

Office of Financial Aid
Valdosta State University
Valdosta, GA 31698

FAX: 229-333-5430