



EMORY UNIVERSITY

Verification of Dependency Status 2016-2017

Emory University
Office of Financial Aid
200 Dowman Drive, Suite 300
Atlanta, GA 30322

Phone: 404.727-6039
Fax: 404.727-6709
Email: finaid@emory.edu

Student's Name:	Emory ID (EMPL):
Email Note: Communications regarding this request will be sent via email to the student's email address marked as preferred in OPUS.	Last 4 Digits of Student SSN (if ID Number Unknown): XXX - XX - _____

INSTRUCTIONS: Our records indicate that you may be considered an independent student due to being an emancipated minor, under legal guardianship, a ward of the court, under foster care, or at risk of homelessness. Complete your personal information above, and **provide court records and other supplemental documentation** to support your claim. If homeless, then the section below must be completed by an approved authority for confirmation of your status. Return the completed form to the Office of Financial Aid.

I qualify as an independent student due to one of the following, and **will provide supporting court documentation:**

- I am an emancipated minor
- I am dependent or ward of the court
- I am homeless or I am at risk of being homeless (*verification section below completed must be by proper authority*)
- I am under legal guardianship
- I am in foster care

ONLY FOR STUDENTS CLAIMING HOMELESSNESS, THIS SECTION TO BE COMPLETED BY PROPER VERIFYING AUTHORITY

As per the College Cost Reduction and Access Act (Public Law 110-84), I am authorized to verify this student's living situation. No further verification by the Financial Aid Administrator is necessary. Should you have additional question or need more information about this student, please use the contact information below.

I certify that I am providing this letter of verification as a (check one):

- A School District Liaison
- A director or designee of a HUD-funded shelter
- A director or designee of a RHYA-funded shelter

Name _____ Phone _____

Email _____ Organization _____

Signature of Certifying Authority _____ Date _____

CHECK ONE TO CONFIRM THE STATUS OF THE STUDENT ABOVE

- This student was an unaccompanied homeless youth after July 1, 2015
This means that, after July 1, 2015, the student listed above was living in a homeless situation, as defined by Section 725 of the McKinney-Vento Act, and was not in the physical custody of a parent or guardian.
- This student was an unaccompanied, self-supporting youth at risk of homelessness after July 1, 2015
This means that, after July 1, 2015 the student listed above was not in the physical custody of parent or guardian, provides for his/her own living expenses entirely on his/her own, and is at risk of losing his/her housing.