VERIFICATION OF INDEPENDENT STUDENT STATUS, 2027-2028

Student Name: _____ ID #: _____

Student Email: _____

Your status as an independent student for financial aid purposes was based upon the answer to one of the questions below on the Free Application for Federal Student Aid (FAFSA). In order to verify your Independent student status, please check the question that applies to you. You will need to submit appropriate documentation in order to approve your Independent status. Financial Aid cannot be finalized until we receive all necessary documents.

- _____ As of today, are you married? **Provide a copy of your marriage certificate**.
- _____ Are you currently serving on active duty in the US Armed Forces for purposes other than training? Or, are you a veteran of the US Armed Forces? **Provide a copy of your DD-214 or deployment papers.**
- _____ Do you now have or will you have children who will receive more than half of their support from you between July 1, 2027 and June 30, 2028? **Provide proof of support (examples could be daycare or health insurance payments paid by you).**
- _____ Do you have dependents (other than your children or spouse) who live with you and who receive more than half of their support from you, now and through June 30, 2028? **Provide proof of support (examples could be rent or health insurance payments paid by you).**
- _____ At any time since you turned age 13, were you an orphan (no living biological or adoptive parent), were you in foster care or were you a dependent or ward of the court? **Provide signed, dated, court documentation.**
- _____ As determined by a court in your state of legal residence, are you or were you an emancipated minor? **Provide a copy of the court's decision documenting you are an emancipated minor from the state of your legal residence.**
- _____ Does someone other than your parent or stepparent have legal guardianship of you, as determined by a court in your state of legal residence? **Provide a copy of the court's decision documenting you are in legal guardianship from the state of your legal residence.**

Please complete this form, sign and submit it along with supporting documentation to the address listed below.

_____ _____

Student Signature Date

To protect yourself from potential identity theft, do not email this information. Please complete and return back to our office by mail or drop off directly in our office.

Return to: Ripon College Office of Financial Aid
300 W. Seward Street
Ripon, WI 54971

Once all documents have been received, our office will review and respond to you if anything else is needed within two weeks of receipt. All further communication will be via student email provided.