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FinancialAid@MissouriState.edu





Office of Student Financial Aid 901 S. National Ave Springfield, MO 65897 www.MissouriState.edu/FinancialAid

2023-2024 Proof of Orphan, Foster Care, or Ward of the Court		
	M	
Student's Name (Last) (First)	BearPass #	Student's Date of Birth
COMPLETE	ALL SECTIONS	
You indicated on your 2023-2024 FAFSA that after age 13 you we to confirm this status and ensure appropriate aid is awarded, pleasupporting documentation.		
If you have submitted documentation supporting your status to Nagain. Check the box below indicating you have submitted documeturn just this form.		
I have submitted documentation to support my status in p	rior years.	
A. Proof of Orphan/Foster Care/Ward of the Court		
Please check the box that best represents your situation and subr	nit the required documentation to ou	r office.
STATUS	REQUIRED DOCUM	MENTATION
☐ No living parents	Both parents' death certificates  AND	
You had no living parent (biological or adoptive) when you were age 13 or older, even if you are now adopted.	Student's birth certificate indicatin official documentation documenting	
Foster Care		
You were in foster care when you were age 13 or older, even if you are no longer in foster care as of today.	Legal documentation from your state	e of residency
Dependent/Ward of the Court		
You were a dependent/ward of the court when you were age 13 or older, even if you are no longer a dependent/ward of the court as of today.	Court documents	
B. Certification Statement & Signature		
By signing below, I acknowledge that I have read and under attached all supporting documents, and certify that all inforknowledge. I understand that submitting this form does not granted.	mation submitted is accurate and	true to the best of my
Student's Physical Ink-Signature (No Digital Signatures)		