



ATTENTION: FTP	
SUBMIT ONLINE: www.ccbc.edu/fa-forms <small>(scroll to the bottom)</small> <small>"Securely upload your documents"</small>	Fax 443-840-2824
<small>PLEASE DO NOT CALL TO CONFIRM RECEIPT!</small> <small>Allow 24-48 business hours for login, then view status of all forms online via SIMON account (https://simon.ccbc.edu)</small>	

<small>FOR OFFICE USE ONLY</small>	
<small>STAMP HERE</small>	
CAMPUS: _____	INITIAL: _____
C	D
E	OM

**Financial Aid Office
WORFI**

Name: _____ CCBC ID: _____

SECTION A: CIRCUMSTANCES (continued)

<input type="checkbox"/> At any time since you turned 13, you were in FOSTER CARE	
Documentation	<p> Attach a copy of legal documentation from the court of your state of legal residence or social service agency indicating when you were placed in foster care; <u>and</u></p> <p> Attach copy of legal adoption documentation, if applicable.</p>
Supplemental Questions	<p>1. Provide age when you were placed in foster care: _____</p> <p>2. Provide dates you were in foster care: From ____/____/____ to ____/____/____ month / year month / year</p> <p>3. Were you legally adopted? ___No ___Yes *If yes, provide age at adoption: _____</p>

<input type="checkbox"/> At any time since you turned 13, you were a DEPENDENT OR WARD OF THE COURT	
Documentation	<p> Attach a copy of court document indicating that you were placed under the care, custody, and control of the court/state. It must include the reason for your placement and name of the facility.</p> <p> Attach copy of legal adoption documentation, if applicable.</p>
Supplemental Questions	Were you legally adopted? ___No ___Yes *If yes, provide age at adoption: _____

<input type="checkbox"/> You are/were an EMANCIPATED MINOR	
➤ I was released from the control of my parent or guardian as determined by a court of law.	
Documentation	Attach a copy of legal documentation from the court of your state of legal residence. The court must be located in your state of legal residence at the time the court's decision was issued.
Supplemental Questions	<p>1. Date the court declared you an emancipated minor: ____/____/____ month / year</p> <p>2. Your age at that time: _____</p>

SECTION B: CERTIFICATION

- I understand all Proof of Independent Forms are reviewed on a case-by-case basis, and this written request does not guarantee approval.
- I have attached all documentation required for the status that I selected above.
- If requested, I agree to provide further documentation to substantiate this request. Failure to submit all requested documentation will result in denial of the independent status for financial aid purposes.

Warning: The student signing this worksheet certifies all the information reported is complete and accurate. If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student's Signature Date

Please allow *at least* 2-3 weeks after ALL documents submitted for review. Check your SIMON account for status updates.
All documents must be submitted by the last day of the semester.