



2024-25 Orphan/Ward of the Court/Foster Care Verification Form

Student's First Name		WSU Student ID #	
Student's Last Name		Phone Number	

You reported on your FAFSA that you are an orphan, or you were a ward of the court, or you were in foster care. To complete the determination of your eligibility for financial aid, please complete and submit this form to the Office of Student Financial Aid with the required documentation **within 14 business days**. Include your student ID number on all documents submitted.

	CHECK below	REQUIREMENTS
<input type="checkbox"/>	<p>I am an orphan. Check this box only if you had no living parent (biological or adoptive) at any time since you turned age 13, even if you are now adopted.</p>	Attach a copy of the death certificate of each of your parents.
<input type="checkbox"/>	<p>I was in foster care. Check this box if you were in foster care at any time since you turned age 13, even if you are no longer in foster care as of today.</p>	Attach a copy of the state Department of Human Services Verification of Court/State Ward Status form from your caseworker.
<input type="checkbox"/>	<p>I am a state ward of the court, or I was a state ward of the court. Check this box if you were a dependent or ward of the court at any time since you turned age 13, even if you are no longer or a dependent or ward of the court as of today.</p>	Attach a copy of the court decree from the Family Independence Agency (FIA).
<input type="checkbox"/>	<p>I am a county ward of the court, or I was a county ward of the court. Check this box if you were a dependent or ward of the court at any time since you turned age 13, even if you are no longer a dependent or ward of the court as of today.</p>	Attach a copy of the Letters of Guardianship or Order of Discharge from Guardianship.
<input type="checkbox"/>	<p>I made an error on my FAFSA. I am/was neither an orphan nor a ward of the court, and neither am I/was I in foster care.</p>	You and one parent MUST correct the information on your FAFSA at studentaid.gov by providing your parent(s)' financial information and signature.

REQUIRED SIGNATURE: I certify that all information reported is complete and correct. I understand that changes in my FAFSA financial information based on the documentation provided may result in a change in financial aid eligibility.

(Signature must be handwritten with ink or stylus)

Date