



## 2022-2023 Verification of Independent Status Form

Student Name \_\_\_\_\_ ID \_\_\_\_\_

**On the 2022-2023 Free Application for Federal Student Aid (FAFSA), you indicated that you are independent due to one of the reasons listed below.** Please check your response and submit the documents to verify your independent status. If your response was not correct on your FAFSA, please make corrections on your FAFSA at [www.fafsa.gov](http://www.fafsa.gov) and include parental information. Please email [finaid@sju.edu](mailto:finaid@sju.edu) once you make the correction.

**I marked one of these questions in error on my FAFSA.** I have corrected this mistake by making the necessary changes to my FAFSA at <https://fafsa.gov> and included parental information.

**I am Married:** Please submit a copy of your marriage certificate.

**I am a VETERAN of the U.S. Armed Forces:** Please submit a copy of all pages of your discharge DD214 papers - especially page 4.

**I have Dependent Children:** If you have any children who receive more than half of their support from you and who live with you (not in your parent'(s) or other relative's home), and who receive more than half of their support from you now and through June 30, 2022, please submit documentation of how you are supporting them. Please submit a copy of your 2020 tax return claiming your child as a dependent, 2020 W2 forms.

**I have Legal Dependents:** If you have dependents, other than your children/spouse, who live with you and who receive more than half of their support from you now and through June 30, 2022 please submit documentation of how you are supporting a dependent. Please submit a copy of your 2020 (and 2021 when available) tax return claiming this individual as a dependent, 2020/2021 W2 forms. Also submit any official legal/court documents.

**Since turning age 13, both of my parents were deceased, or I was in foster care, or I was a dependent or ward of the court**

Please submit a copy of both parents' death certificates. Please submit documentation of your state certified foster care. Please submit Court orders indicating that you are a ward of the court.

**I am an Emancipated Minor as determined by the court or in Legal Guardianship as determined by a court in my state of legal residence**

**Required supporting documentation:**

A court order of Legal Emancipation from your state of legal residence

Your age at the time of Emancipation: \_\_\_\_\_ State of residence: \_\_\_\_\_

Proof of Legal Guardianship from your state of legal residence

Your age at the time of Legal Guardianship: \_\_\_\_\_ State of residence: \_\_\_\_\_

**I am homeless or I am at risk of being homeless.**

At any time on or after July 1, 2021, your high school or school district homeless liaison determined that you were an unaccompanied youth who was homeless,

Or at any time on or after July 1, 2021, the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determined that you were an unaccompanied youth who was homeless,

Or at any time on or after July 1, 2021, the director of a runaway or homeless youth center determined that you were homeless or self-supporting and at risk of being homeless.

**OVER→**

**Required supporting documentation:** Please provide a copy of the determination of status by the official homeless liaison or designee and please request a **2022-2023 Unaccompanied Homeless Youth Verification Form** via email at [finaid@sju.edu](mailto:finaid@sju.edu).

**Signature and Affirmation:**

*The Saint Joseph's University Financial Aid Office reserves the right to request any and all supporting documentation we deem necessary to complete a fair and accurate evaluation of your independent status. If you fail to comply with requests for additional documentation we will not process your financial aid. If you receive student aid based on incorrect information, you may have to return it and/or pay fines and fees. By signing this form, I certify that all information I have submitted is true, complete, and accurate to the best of my knowledge.*

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Signature of Student

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Date

**The student should return this form with any relevant supporting documentation to:**

**Mail:** St. Joseph's University  
Financial Aid Office  
Barbelin 121  
5600 City Avenue  
Philadelphia, PA 19131

**Email:** [finaid@sju.edu](mailto:finaid@sju.edu)