



Meredith College
Office of Financial Assistance
3800 Hillsborough St.
Raleigh, NC 27607
Fax 919-760-2373

2024-25 Dependency Documentation

		XXX-XX- <input type="text"/> <input type="text"/> <input type="text"/> <input type="text"/>
Last Name	First Name	Last 4 digits student's SSN

On your 2024-25 FAFSA, you indicated that you have an unusual circumstance related to your being an Orphan, Ward of the Court, in Foster Care, an Emancipated Minor, in Legal Guardianship or a category related to homelessness. Please complete this form by checking the box below that best describes your situation and attach the documentation requested to verify your status.

I made an error on my FAFSA. I do not fit into any of the categories listed above. I will correct my FAFSA online at <https://studentaid.gov/h/apply-for-aid/fafsa>. (Use your FSA ID and password to make a correction to your FAFSA and if necessary, add parent information).

I have provided documentation in a previous year and my status has not changed.

When I was age 13 or older, I became an orphan, ward of the court, or was in foster care. Please provide a copy of the court documents.

I am an emancipated minor or am in legal guardianship. Please provide a copy of the court documents from your state of legal residence.

I received a determination on or after July 1, 2023, that I am an unaccompanied youth who is homeless, or at risk of being homeless. "Homeless" means lacking fixed, regular and adequate housing, which includes living in shelters, motels or cars, or temporarily living with other people because you had nowhere else to go. "Unaccompanied" means you are not living in the physical custody of your parent or guardian. Please provide verification on official agency letterhead, from either your School District Liaison, HUD-funded Shelter, Runaway/Homeless Youth Center, or other official agency. Please contact our office to speak with your financial aid counselor if you have questions about providing documentation.

Student Certification

I hereby declare that all information reported on this document is true, complete and accurate to the best of my knowledge. I understand that any false statement or misrepresentation will be cause for denial, reduction, withdrawal and/or repayment of financial assistance.

Student Signature: _____ Date: _____