

DEPENDENCY STATUS CERTIFICATION

Academic Year 2024-2025

RETURN FORM:

ONLINE:

z.umn.edu/upload-financial-aid-documents

BY MAIL TO:

Office of Student Finance
160 Williamson Hall
231 Pillsbury Dr. SE
Minneapolis, MN 55455-0252

IN PERSON ON CAMPUS TO:

One Stop Student Services
333 Robert H. Bruininks Hall

Questions?

Phone: 612-624-1111
TTY (hearing impaired): 612-626-0701
Email: onestop@umn.edu

DIRECTIONS—Additional documentation is required to support your responses provided in question 5, Student Personal Circumstances, on your Free Application for Federal Student Aid (FAFSA). Please sign and submit your completed form using the electronic dropbox (z.umn.edu/upload-financial-aid-documents). Processing of your financial aid is on hold until this certification is submitted.

In order to maximize your financial aid eligibility, this form should be submitted at least two weeks prior to the end of the term in which you are seeking financial aid. Forms submitted within two weeks of the end of term will be reviewed, but financial aid funds may be limited or no longer available.

To ensure privacy online, open in Adobe Reader (free at Adobe.com). Please add the required signature(s) in blue or black ink.

SECTION A. Student information		
Legal name (last, first, middle initial, required)	Preferred name (optional)	University ID
Phone (include area code)	Birthdate (mm/dd/yyyy)	University email
SECTION B. Dependency information		
For each question, check the box to indicate your answer.		
Was your father (biological or adoptive) deceased when you were 13 years of age or older?.....	<input type="checkbox"/> yes	<input type="checkbox"/> no
Was your mother (biological or adoptive) deceased when you were 13 years of age or older?.....	<input type="checkbox"/> yes	<input type="checkbox"/> no
At any time since you turned age 13, were you in foster care?..... If yes, ATTACH documentation from your social worker or a court of law.	<input type="checkbox"/> yes	<input type="checkbox"/> no
At any time since you turned age 13, were you a ward of the court?..... If yes, ATTACH documentation from a court of law or a letter from your county social worker	<input type="checkbox"/> yes	<input type="checkbox"/> no
Are/were you a legally emancipated minor as determined by a court in your state of residence? (Not emancipated due to parents' divorce.)..... If yes, ATTACH documentation from a court of law in your state of legal residence	<input type="checkbox"/> yes	<input type="checkbox"/> no
Are/were you in a legal guardianship with someone other than your parent or stepparent, as determined by a court in your state of residence?..... If yes, ATTACH documentation from a court of law in your state of legal residence	<input type="checkbox"/> yes	<input type="checkbox"/> no
SECTION C. Student certification		
You must sign this form certifying that the information you provided is complete and correct. Misrepresentation of facts in connection with this form may be sufficient cause, in and of itself, for cancellation or repayment of financial aid, whenever discovered. If you purposely give false or misleading information on this form, you may be fined, sentenced to jail, or both.		
Student signature	Date	

