

2017/2018 Ward of the Court Verification Form

		F	Please print in black ink only.		
Student Nam	ne:				
	Last Name		First Name/MI	Student ID or SSN	
Address:				Phone:	
	Street Address		Apt#		
City		State	Zip		
Please Check	(🗸) the appropriate requ	uest(s) and retur	n to the Financial Aid Offic	e.	
you are (or w	ere until age 18) a Ward of	the Court. All o		ster care, both your parents are deceased, or that ree of your FAFSA were answered "No." Please n.	
	Documentation	Documentation: Please submit a signed statement listing the names(s) of your deceased birth/adopted parent(s) and their Death Certificate(s).			
	I was in foster care or was a Ward of the Court for a reason other than juvenile misbehavior. Documentation: Please submit DHS/court documentation showing status and dates.				
	I am not an Orphan, was	not in foster car	re and was not a Ward of th	e Court. Please correct my FAFSA for me.	
Student Signature				Date	

Please return completed form via mail or fax to:

Columbia Gorge Community College Financial Aid Office 400 East Scenic Drive The Dalles, OR 97058 Fax: (877) 368-6370

Email: financialaid@cgcc.edu

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