

## 2024-2025 Independent Status Confirmation

Return this form to:
Mail: HCC Financial Aid
606 West Main
Highland KS, 66035

Email: financialaid@highlandcc.edu

Fax: 785-442-6106

Phone: 785-442-6000 ext. 2002

	A. StudentInformation				
ast I	Name	First Name	MI	Student ID	
Date of Birth		Telephone Number E-Mail.	Address		
At tl	he time you complete	d the 2024-2025 FAFSA, you marked you are an	indepe	ndent student. Before we can offer	
	· •	confirm your status and attach the required o		•	
or i	ndependent status, yo	ou will be required to update your FAFSA with pa	arent inf	formation.	
Plea		Categories us accurately reflects your situation by checking ted documentation attached.	g the app	propriate box and return the form to	
Che	eck applicable status	Description	Docu	umentation required	
	You have a Child or Other Dependent	You provide more than half of the support for your child or other dependent.  Note: You must provide at least 50% of support. If you are unable to prove you provide at least 50%, you will be considered a dependent student and must provide parent information on the FAFSA.			
	No Living Parent	At any time since you turned 13, you had no living parent, even if you are now adopted.	Both pa	rents' death certificates	
	In Foster Care	At any time since you turned 13, you were in foster care, even if you are no longer in foster care.	Legal do	ocumentation from your state of residency	
	Dependent/Ward of the Court	At any time since you turned 13, you were a dependent or ward of the court even if you are no longer a dependent or ward of the court. For federal student aid purposes, an incarcerated person is not considered a ward of the court.	Copy of	court decision	
	In Legal	You are in legal guardianship as determined by a court in your state of legal residence, or were in legal guardianship immediately before you reached the age	Copy of	court decision	
	Guardianship	of majority (adulthood) in your state.			

Signature must be handwritten; digital signatures not accepted.