

Signature

## West Liberty University

Office of Financial Aid 208 University Drive College Union Box 124 West Liberty, WV 26074 Phone: (304) 336-8016 finaid@westliberty.edu

## 2023-2024 Independent Student Status Confirmation

Studen	it's Name:	Student's ID Number:
are an i	ing to our records, you indicated on the 2023-2024 Free Appli independent student because you met one of the following crit entation to the Financial Aid Office, as indicated below:	
<b>√</b>	Independent Student Eligibility Criteria (check one)	Supporting Documentation Required
	I was born before January 1, 2000.	Copy of birth certificate or driver's license
	I was married before the date I filed the FAFSA.	Copy of marriage license
	I have a legal dependent other than a spouse, who will receive more than 50% of his/her financial support from me between July 1, 2023 and June 30, 2024.	Copy of your 2021 Tax Transcript from the IRS or a copy of your insurance policy listing your dependent(s).
	Both of my parents were deceased after I turned 13, even if I am now adopted.	Copies of your parents' death certificates or signed letters from family members documenting your circumstance. If one parent is deceased and the other parent's whereabouts are unknown, attach a letter of explanation.
	I am currently, or was, a ward/dependent of the court or in foster care since the age of 13.	Copy of court documentation regarding your ward/dependent of the court status. Copy of documentation from foster care agency
	I am or was an emancipated minor as determined by a court in my state of legal residence.	Copy of court documentation explaining that you are an emancipated minor as determined by a court in your state of legal residency.
	I am or was in legal guardianship as determined in my state of legal residence.	Copy of court documentation explaining your legal guardianship as determined by a court in your state of legal residency.
	I am currently serving in the U.S. Armed Forces or a National Guard or Reserves enlistee who is on active duty for other than state or training purposes.	Signed letter from your commanding officer confirming your active duty status.
	I am a veteran of the U.S. Armed Forces and received an honorable discharge.	Copy of your DD214 showing military service other than the Reserves or National Guard.
	I was homeless or at risk of being homeless.	Official letter from a high school district homeless liaison or the direct of a U.S. Department of Housing and Urban Development funded homeless shelter. The letter must include contact information for verification purposes.
	I am a graduate or professional student	No supporting documentation required.
	I answered the FAFSA incorrectly and none of these conditions apply to me <b>OR</b> I have an unusual circumstance.	You must either update your 2023-2024 FAFSA by changing your answer(s) to the dependency questions and include your parental information and parental signature <b>OR</b> complete the Dependency Override form available on the Financial Aid webpage.

I hereby certify that all information contained in this document, including supporting documentation, is true and complete to the best of my knowledge. I understand that if I am found to have knowingly or intentionally given false

Date

or fraudulent statements and/or documentation, I may be fined, imprisoned or both.