

Emancipated Minor & Legal Guardianship Confirmation

Office of Student Financial Aid

Last Name	First Name	M.I.	C 0 0
			BRCTC ID number
Address			
			Phone Number (include area code)
City	State	Zip Code	
			Email Address
You indicat	ed on your Free Application for Feder	al Student Aid (FA	AFSA) that you were or are an Emancipated Minor as determined
by a court i	in your state of legal residence or you	were or are in leg	al guardianship as determined by a court in your state of legal
	Our office must confirm and docume or Federal financial aid funds.	nt your emancipat	tion or guardianship status before we can determine your
Please ched	ck the appropriate box that applies to	your situation and	d attach the requested documentation.
□ I am o	r I was an emancipated minor Check	only if:	
•	 You are attaching a copy of a court's decision that, as of today, you are an emancipated minor, OR You are attaching a copy of a court's decision that you were an emancipated minor immediately before you reached 		
•			
	the age of being an adult in your st	ate.	
	Please note: the court must be loc	ated in your state	of legal residence at the time the court's decision was issued.
□ I am o	r was in legal guardianship Check on	ly if:	
•	You are attaching a copy of a court	's decision that, as	s of today, you are currently in legal guardianship, OR
•	You are attaching a copy of a court guardianship immediately before re		arge from Guardianship" which documents that you were in legal f being an adult in your state.
	Please note: the court must be loc	ated in your state	of legal residence at the time the court's decision was issued.
□ I made	e an error on the FAFSA I am not in legal guardianship or I have not been granted emancipated minor status.		
•	You must correct question 53 or 54	on your FAFSA an	nd provide parental data.
CERTIFICAT	TION:		
	re below certifies that the informatio		is true and correct to the best of my knowledge. I understand that prison sentence, or both.
Student Signature			Date

To return this form:

Mail: Office of Student Financial Aid 13650 Apple Harvest Drive Martinsburg WV 25403

Fax: 304-260-4376

Email: finaid@blueridgectc.edu - DO NOT EMAIL TAX DOCUMENTS OR ANYTHING WITH SOCIAL SECURITY NUMBERS