



Financial Aid
 May Hall, Room 209
 Dickinson State University
 291 Campus Drive
 Dickinson, ND 58601-4896

Office Hours: 7:45 a.m. - 4:30 p.m. Monday - Friday
 Phone: 1-800-279-4295 ext. 2 or 701-502-4407
 Fax: 701-483-2409
 Web: www.dickinsonstate.edu
 Email: dsu.financialaid@dickinsonstate.edu

Emancipated Minor/Legal Guardian Form

Student's Name _____ Student's ID# _____

On your FAFSA, you indicated that you are an emancipated minor or in legal guardianship.

Please mark the category below that pertains to your specific situation. If you have any questions on how to complete this form or what you need to submit, contact the financial aid office.

Emancipated Minor

Prior to reaching the age of majority in my state (usually age 18) I was released from the control of my parent or guardian as determined by a court of law in the state of which I was a resident of at the time. *Note: Emancipate does NOT mean you pay for your own bills and your parents do not support you.*

1. Date the court declared you an emancipated minor (month/year) _____
2. Your age at the time _____

DOCUMENTATION REQUIRED: A copy of the court papers signed by a judge, verifying your status as an emancipated minor.

If you do not have court papers, you cannot be considered independent for financial aid purposes.

Under Legal Guardianship of Someone Other Than Parent

Prior to reaching the age of majority in my state (usually age 18), someone other than my biological or adoptive parent(s) was appointed as my legal guardian by a court of law in the state of which I was a resident at the time. Although my parents' rights may not have been permanently terminated, my legal guardian had custody of me, was responsible for raising me, and was appointed to make decisions about my life. *Note: Legal guardianship does NOT pertain to divorced parents where one has legal custody of you.*

1. Date the court appointed someone other than your parent as your legal guardian (month/year) _____
2. Your age at the time _____
3. Name of person(s) appointed as your legal guardian(s) _____

DOCUMENTATION REQUIRED: A copy of the court papers signed by a judge, verifying that someone other than your parent was appointed as your legal guardian. *If you do not have court papers, you cannot be considered independent for financial aid purposes.*

Neither category above pertains to me

You must log in at www.FAFSA.gov and change question #5 Student Personal Circumstances to "None of these apply." You will be required to provide parental information and both you and your parent must sign the FAFSA with your individual FSA IDs and passwords.

I have updated question ##5 Student Personal Circumstances to "None of these apply" and have provided parental information on the FAFSA on _____

(Date & Initial)

To ensure timely processing of your aid, we ask that you submit this completed form to the address below **within 2 weeks**. Your financial aid will not be processed until the Verification process has been completed. Be sure to check your To Do List on Campus Connection for any other documents that are needed to complete Verification.

I certify the information on this form is true and complete to the best of my knowledge. I understand that purposely giving false or misleading information may result in fines, penalties, and/or reduction or immediate repayment of aid. I understand that the information provided on this form may affect my financial aid eligibility/award.

Student Signature _____ Date _____

Note: Unsigned documents will be returned. This form must be signed with a physical signature. Typed names or electronic signatures are not acceptable.