

Student Name (printed) _____ Ball State ID # _____



Office of Financial Aid and Scholarships (OFAS)
Ball State University, Lucina Hall, Room 245
Muncie, Indiana 47306-0880
<http://www.bsu.edu/finaid>

Telephone # 765-285-5600
Toll free # 800-227-4017
FAX 765-285-4247
E-mail finaid@bsu.edu

Ward of the Court Verification

We have received the data from your Free Application for Federal Student Aid (FAFSA).

You stated that at some point since you turned age 13, both your parents were deceased, you were in foster care, or were a dependent or ward of the court. Attach a copy of your court documents to certify your status.

If you did not answer the question correctly, check here _____ and return this letter to our office.

CERTIFICATION STATEMENT: You must read and sign this statement. I certify that all of the information provided on this letter and on the attached documentation is accurate and complete. If I purposely give false or misleading information, I may be fined \$20,000, sent to prison, or both.

Student Signature _____ Date _____