



Financial Aid Office  
PO Box 421  
Glendive, MT 59330  
Phone: (406) 377-9410  
Fax: (406) 377-8132

**DAWSON COMMUNITY COLLEGE  
INDEPENDENT STUDENT  
STATUS VERIFICATION**

Dear Student:

Your Student Aid Report indicates you responded 'yes' to one of the questions in the Dependency Status Section of the 2022-2023 FAFSA. Please provide the required documentation, for the item below marked with an 'X', for verification of that response. **This information is required prior to the processing of your financial aid.**

\_\_\_\_\_ This form must be accompanied by a copy of student's college transcript indicating date Bachelor's degree was received; unless already provide to the Office of Admissions.

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\_\_\_\_\_ This form must be accompanied by a copy of the student's marriage certificate

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\_\_\_\_\_ This form must be accompanied by a photocopy of:

- a) court documents demonstrating 'ward of the court' status;
- OR**
- b) court documents demonstrating 'foster care' status;
- OR**
- c) photocopies of parents' death certificates demonstrating 'orphan' status.
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\_\_\_\_\_ This form must be accompanied by a photocopy of the U.S. Armed Forces Presidential call to active duty for 'purposes other than training'.

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\_\_\_\_\_ This form must be accompanied by a photocopy of the U.S. Armed Forces discharge papers, other than dishonorable. (DD214)

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\_\_\_\_\_ This form must be accompanied by court determination of emancipation from state of legal residence.

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\_\_\_\_\_ This form must be accompanied by court determination of legal guardianship from state of legal residence.

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\_\_\_\_\_ This form must be accompanied by the determination of being an unaccompanied homeless youth on or after 7/1/2021, from state of legal residence high school/district homeless liaison, HUD emergency shelter/transitional housing director, or runaway/homeless youth basic center/transitional living program director.

\_\_\_\_\_ Print Name

\_\_\_\_\_ Student Signature

\_\_\_\_\_ Date