## Lander University Financial Aid Office
320 Stanley Avenue, Greenwood, SC 29649
Email: finaid@lander.edu • Web: www.lander.edu/finaid
Phone: (864) 388-8340 • Fax: (864) 388-8811

25ORPH

## 2024-2025 Orphan Verification Form

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**Student's Last Name**　　　　　　**First Name**　　　　　　**MI**　　　　　　**Lander ID (L#)**

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**Address:  Street**　　　　　　**City**　　　　　　**State**　　　　**Zip**


**On the FAFSA, you indicated that you were an orphan at any time since you turned 13.  Please complete the form below to verify your status.**

☐ **I am an orphan.  Both biological parents are deceased.  I am not adopted.**  -  Check this box only if **both your biological parents are deceased.**  Do not check this box if one parent is deceased and you have little or no contact with your other parent or if the whereabouts of your other parent is unknown.  If both parents are deceased and you have a legal guardian, you are still considered to be an orphan and can check this box.
- o Please attach a copy of your birth certificate identifying your parents
- o Please attach copies of your parents' death certificates.

☐ **I am an orphan.  Both biological parents are deceased.  I was adopted after age 13.**  -  Check this box only if **both your biological parents are deceased AND you were adopted at any time since you turned 13.**  Do not check this box if one parent is deceased and you have little or no contact with your other parent or if the whereabouts of your other parent is unknown.  If adopted before age 13, check that you are not an orphan.  You will report your adoptive parents' information on the FAFSA.
- o Please attach a copy of your birth certificate identifying your parents and court documents showing date of adoption
- o Please attach copies of your parents' death certificates.

☐ In addition, if you are a SC resident and are in the custody of the **SC Department of Social Services** and this is not indicated in the court document, you may provide a letter from DSS verifying this so we may evaluate eligibility for limited SC Need-based Grant funding (contingent upon availability).  A SC Need Based Grant Waiver Form for foster care youth is available at www.lander.edu/finaid/forms.

☐ **None of the statements above apply to me.** – Since you do not qualify as an independent student based on being an orphan, you will need to:
- o Correct your FAFSA by unchecking the item to question #5 "At any time since the student turned 13, they were an orphan (no living biological or adoptive parent).".
- o Complete the FAFSA with parent information (and if applicable, stepparent) information.  The parent that should be reported on the FAFSA is the parent who provides the greater portion of the student's financial support, even if the student does not live with them.
- o If you feel you have special circumstances, you may review and submit the 2024-2025 Dependency Appeal Form available at www.lander.edu/finaid/forms  to the Lander University Financial Aid Office.
- o Complete and return this form to the Financial Aid Office.

I declare that all the information reported on this document is true and accurate.  I understand that any false statement or misrepresentation will be cause for denial, reduction, withdrawal and/or repayment of financial aid.

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**Student's Signature (Required)**　　　　　　**Phone #**　　　　　　**Date**

| DATA ENTRY | | Financial Aid Office  Use Only | COUNSELOR REVIEW (circle one) |
|---|---|---|---|
| RRAAREQ | N=Pending Review Insert CNSLV N=Pending Review | **Orphan documentation Received and Approved:** * xxORPH = S          * Update ROANYUD **30** Orphan Verf'd = Y       *Re-track on ROAIMMP | |
| Initials/date | | **Orphan documentation Incomplete:** *xxORPH = I (or M and ROAMESG = ORPI if incomplete and something to be mailed back) | |
| FSAH AVG Fwd to Counselor date | Counselors must finalize their review within 60 days of receipt of initial application. | **Orphan Status not Approved:** *RNANAxx Orph = N         *Recalc Need and update ROAUSDF SAI and trans *RRAAREQ - xxORPH = S ,  CORRP= E     *Re-track on ROAIMMP unless parent info provided, will track into UNSAR or UNSIGN         *ROAMESG – type note unable to approve | |
| | **In addition, for students in custody of DSS:** | Institutions must give first priority and award the maximum allowable Need-based Grant ($3,500 if full-time or $1,750 if part-time) to students who are in the custody of the South Carolina Department of Social Services (DSS).   Review award. | |
| | | CNSLR Initials and date | |