

Dependency Status Verification

2026-2027 (Fall 2026, Spring 2027, Summer 2027)



Office of Financial Aid
UNIVERSITY OF COLORADO BOULDER

Name: _____
Student's Name (Last, First, M.I.)

ID: _____
Student Identification Number (SID)

Please provide all requested information, **including required attachments**, and sign below. Additional tax information will be required after completion of this form. Check your email or portal to-do items for next steps.

1. For the start of the 2026-27 school year, what type of degree will you be seeking?
Undergraduate working toward first Bachelor's degree
Graduate/Professional working toward Master's/Professional degree
Working toward second Bachelor's degree, certificate or nondegree
2. Are you currently serving on active duty in the U.S. Armed Forces for purposes other than training?
No
Yes – If yes, please **attach a copy of your leave and earnings statement**.
3. Are you a veteran of the U.S. Armed Forces?
No
Yes – If yes, please **attach the copy of your DD-214-Certificate of Release or Discharge from Active Duty with "Character of Service."**
4. What was your marital status on the date you originally submitted your 2026-27 FAFSA?
Single, divorced, or widowed
Married/remarried – month and year you were married: _____
Separated – month and year you were separated: _____
5. Do you have children who will receive more than half of their financial support from you (and your spouse, if married) between July 1, 2026 and June 30, 2027?
No
Yes – If yes, **list their names and ages:** _____
6. Do you have dependents (other than your children or spouse) who live with you and receive more than half of their financial support from you (and your spouse, if married), now and through June 30, 2027?
No
Yes – If yes, **submit the [Verification of Family Size - Independent](#) form.**
7. At any time since you turned age 13, were both of your parents (biological or adoptive) deceased?
No
Yes – If yes, **attach a copy of the death certificate for each parent.**
8. At any time since you turned age 13, were you in foster care or a ward/dependent of the court?
No
Yes – If yes, **attach copies of legal or court documents demonstrating foster care, ward/dependent of the court. Documents marked 'temporary' or referencing 'custody' are not sufficient per federal requirements. Please contact us if you have questions about your documents.**

PLEASE SEE OTHER SIDE FOR REMAINDER OF FORM, INCLUDING SIGNATURE CERTIFICATION

Please submit your form by mail or online at www.colorado.edu/financialaid/forms/secure-document-upload
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9. Are you or were you an emancipated minor, or in legal guardianship as determined by a court in your state of legal residence?

No

Yes – If yes, **attach copies of legal or court documents demonstrating a decision for emancipated minor or legal guardianship. Documents marked ‘temporary’ or referencing ‘custody’ are not sufficient per federal requirements. Please contact us if you have questions about your documents.**

10. At any time on or after July 1, 2025, were you an unaccompanied youth who was homeless or was self-supporting and at risk of being homeless?

No

Yes – If yes, **attach a copy of the determination from one of the following:**

- **A local educational agency homeless liaison.**
- **The director or designee of an emergency or transitional shelter, street outreach program, homeless youth drop-in center or other program serving individuals who are experiencing homelessness.**
- **The director or designee of a program funded under subtitle B of title IV of McKinney-Vento (relating to emergency shelter grants).**
- **The director or designee of a Federal TRIO program or a Gaining Early Awareness and Readiness for Undergraduate program (GEAR UP) grant.**
- **A financial aid administrator at another institution who documented the student’s circumstance in the same or a prior award year.**

If you don’t attach a copy of determination, an Advisor will contact you to review your request.

If you answered no to all these questions, you need to update and resubmit your FAFSA with parental information. If you believe you have special circumstances that make you unable to provide parent information, please contact our office for assistance.

By signing this form, I certify that all the information provided is complete and accurate.

Student signature

Date

Electronic and typed signatures are not accepted

Please submit your form by mail or online at www.colorado.edu/financialaid/forms/secure-document-upload
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