

Financial Aid Office  
PO Box 496006, Redding, CA 96049-6006  
Phone: (530) 242-7650

**2020-21 Dependency Status Form-CDAА**

Your 2020-21 California Dream Act (CDAА) was selected as a verification. The law says that before awarding student aid, we must confirm the information you reported on your CDAА. To verify that you provided correct information, the Financial Aid Office will compare your CDAА with the information on this worksheet. If there are differences, your CDAА will be corrected by the Financial Aid Office

**Type on this form, or print legibly with blue or black ink.**

**Select the dependency status that best represents your situation and attach the corresponding required documents.**

- **Veteran (CDAА Q#49-50)**  
You are either currently serving on active duty, other than training, or a veteran of the US Armed Forces.
- **Orphan (CDAА Q#53)**  
At any time since you turned age 13, both of your parents were deceased, even if you are now adopted.
- **Foster Care (CDAА Q#53)**  
You were in foster care at any time since you turned age 13, even if you are no longer in foster care today.
- **Dependent or Ward of the Court (CDAА Q#53)**  
You were a dependent/ward of the court at any time since you turned age 13, even if you are no longer a dependent of ward of the court as of today. (For federal student aid purposes, someone who is incarcerated is not considered a ward of the court.)
- **Emancipated Minor (CDAА Q#54)**  
You have been declared an emancipated minor by the court in your state of legal residency.
- **Legal Guardianship (CDAА Q#55)**  
You have been declared in a legal guardianship by the court in your state of legal residency.
- **Unaccompanied Youth (CDAА Q#56)**  
At any time after July 1<sup>st</sup> 2017, your high school homeless youth liaison determined you were an unaccompanied youth and homeless.
- **Unaccompanied Youth (CDAА Q#57-58)**  
At any time after July 1<sup>st</sup> 2018, the director of an emergency shelter, transitional housing program, runaway or homeless youth basic center, or transitional living program determined that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless
- **Other Unusual Circumstances**  
You have unusual circumstances, not listed on the CDAА, that prevent your parents from providing their information on the CDAА. Examples include: a parent in prison or hospitalized; an estranged family situation; your parents live out of the country and you are unable to maintain reasonable contact with them.
- **Definitions for CDAА questions 56-58:**  
**Homeless-** lacking fixed, regular and adequate housing, which includes living in shelters, motels, camping, cars, or temporarily with other people.

**Unaccompanied-**not living in the physical custody of our parent or guardian.

**Youth-**Younger than 21 years of age and are still enrolled in high school as of the day you signed the CDAА.

**CERTIFICATION & SIGNATURES:**

- Please read all statements, sign and date.



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**Student Information:**

Student ID#:	Date of Birth:	
First Name:	Last Name:	M.I.
Address or PO Box:		
City:	State:	Zip Code:
Email Address:		
Home #:	Cell #:	

Check the box that best fits your situation.  
 Definitions for Dependency statuses below can be found on the instructions page.

Dependency Status:	Required Documents Attached:
<input type="checkbox"/> Veteran.	DD214
<input type="checkbox"/> Orphan	Death certificates for both parents.
<input type="checkbox"/> Foster Care	Legal documentation of foster placement.
<input type="checkbox"/> Dependent or Ward of the Court	Court orders/records
<input type="checkbox"/> Emancipated Minor	Court orders/records
<input type="checkbox"/> Legal Guardianship	Court orders/records
<input type="checkbox"/> Unaccompanied Youth	Unaccompanied homeless determination letter. (Contact your High Schools' Homeless Youth Liaison)
<input type="checkbox"/> Unaccompanied Youth	Unaccompanied homeless determination document From emergency shelter or transitional housing program.
<input type="checkbox"/> Other Unusual Circumstances	Independent Status Appeal: <a href="http://www.shastacollege.edu/fa_forms21">www.shastacollege.edu/fa_forms21</a> .

**WARNING: If you purposely give false or misleading information you may be fined, sentenced to jail, or both.**

Student Name (Please Print): \_\_\_\_\_

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

*This form contains personally identifiable information. It is important to safeguard your information. Do not mail this form to the CA Student Aid Commission. Submit this form by emailing [financialaid@shastacollege.edu](mailto:financialaid@shastacollege.edu), by mail through the U.S. Postal Service to Shasta College, PO Box 496006, Redding, CA 96049-6006 or in person to Shasta College Financial Aid Office Room 139, or at Shasta College Tehama, Trinity, or Intermountain Campuses. Make a copy of this form for your records. Shasta College is an equal opportunity educator and employer. Updated 1/29/20*