

FLORIDA A&M UNIVERSITY FINANCIAL AID

Division of Student Affairs Office of Financial Aid Telephone: (850) 599-3730 Fax: (850) 561-2730 Email: financialaiddocs@famu.edu

2025-2026 Student Personal Circumstances

Student Information	
Full Name (First, MI, Last):FAMU ID:	Date:
	Student Personal Circumstances
Select all that apply and provide supp	porting documentation:
☐ The student is currently serving on ac	ctive duty in the U.S. Armed Forces for purposes other than training.
☐ The student is a veteran of the U.S. A	Armed Forces.
	ople (excluding their spouse) who live with the student and receive more than ow and between July 1, 2025 – June 30, 2026.
☐ At any time since the student turned 1	13, they were an orphan (no living biological or adoptive parent).
☐ At any time since the student turned 1	13, they were a ward of the court.
☐ At any time since the student turned 1	13, they were in foster care.
☐ The student is or was a legally emand	cipated minor, as determined by a court in their state of residence.
☐ The student is or was in a legal guard court in their state of residence.	lianship with someone other than their parent or stepparent, as determined by a
☐ None of these apply.	
	Certification and Signature
additional documentation may be require	on this form is true and correct to the best of my knowledge. I understand that red to verify my circumstances. I understand that failure to provide requested neligibility for certain financial aid programs.
Student Signature:	Date:
(No Electronic Signatures)	