



Office of Financial Aid & Scholarships  
1 University Parkway  
University Park, IL 60484  
708.534.4480  
govst.edu/financialaid

## 2025-2026 LEGAL GUARDIANSHIP FORM

### STUDENT INFORMATION

Please complete this verification form and provide copies of all requested paperwork to Governors State University. **Incomplete paperwork will not be accepted, thereby delaying the processing of your financial aid award.**

Student Name: \_\_\_\_\_ GSU ID # \_\_\_\_\_ Last 4 digits of SS#: \_\_\_\_\_  
(Please Print) Last First

Permanent Home Address: \_\_\_\_\_  
City State Zip Code

Student's Date of Birth: \_\_\_\_\_ Home Phone #: \_\_\_\_\_ Cell #: \_\_\_\_\_

Email Address: \_\_\_\_\_@student.govst.edu

On your FAFSA you indicated that you are or were in a Legal Guardianship Status. Your response to this FAFSA question must be verified before processing of your aid eligibility can continue. You must submit one of the following documents to substantiate your claim:

1.) A copy of a court's decision that as of today you are in legal guardianship.

OR

2.) A copy of a court's decision that you were in legal guardianship before you reached the age of being and adult (majority) in your state.

*Custody awarded pursuant to a divorce decree does NOT constitute an individual as being under legal guardianship.*

### CERTIFICATION STATEMENT

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

\_\_\_\_\_  
Student's Signature Date

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