

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

2024-2025 LEGAL GUARDIANSHIP FORM

STUDENT INFORMATION			
-	cation form and provide copies of vill not be accepted, thereby de		ork to Governors State University. of your financial aid award.
tudent Name: GSU ID #		GSU ID #	Last 4 digits of SS#:
(Please Print) L	ast First		
Permanent Home Address	: City		
	City	State	Zip Code
Student's Date of Birth:	Home Phon	e #:	Cell #:
Email Address:			
be verified before processi substantiate your claim:	ng of your aid eligibility can conti	nue. You must submit	Your response to this FAFSA question must one of the following documents to
1.) A copy of a court's de	ecision that as of today you are	n legal guardianship	•
	OR		
2.) A copy of a court's d (majority) in your sta		guardianship before	you reached the age of being and adult
Custody awarded pursua	nnt to a divorce decree does NOT	constitute an individ	ual as being under legal guardianship.
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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.

CRI CODE: FAC24LGD