SHENANDOAH ${ }^{\circ}$

## 2024-2025 - Fallen in Line of Duty Form

## Student Name:

ID: $\qquad$
On your FAFSA application you have answered "Yes" that your parent was killed in the line of duty while (1) serving on active duty as a member of the U.S. armed forces or after September 11, 2001, or (2) performing official duties as a public safety officer:

## Please check the selection below that applies to you:

I indicated this in error.My parent was killed in the line of duty while serving as an active duty U.S. armed forces member on or after September 11, 2001. (If so, please provide supporting documentation.)$\square$ My parent was killed in the line of duty performing official duties as a public safety officer* on or after September 11, 2001. (If so, please provide supporting documentation.)
$\square$ I have previously submitted documentation to the Financial Aid Office in a prior year. I am requesting my subsequent determination be made by a Financial Aid Administrator. I am providing a written, signed statement indicating my current situation.
*A public safety officer generally includes the following:

- Law enforcement officer, firefighter, or chaplain
- Federal Emergency Management Agency (FEMA) employee
- Emergency management or civil defense agency employee
- Member of a rescue squad or ambulance crew
- Others defined in the Omnibus Crime Control and Safe Streets Act of 1968


## **PLEASE MAKE SURE TO SUBMIT ALL REQUIRED DOCUMENTATION TO THE FINANCIAL AID OFFICE ALONG WITH THIS FORM OR YOUR FINANCIAL AID MAY BE DELAYED**

Certification and Signature: By signing this worksheet, I certify that all of the information reported on it

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

Student Signature - required
Date

