

**Admissions, Registration and Records**

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South Classroom 133



COMMUNITY COLLEGE OF  
**DENVER**

**DECLARATION OF EMANCIPATION**

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Name \_\_\_\_\_

Student ID Number

Address \_\_\_\_\_  
Street Apt. #

City State Zip/Country

Date of Birth \_\_\_\_ / \_\_\_\_ / \_\_\_\_ Age: \_\_\_\_  
Month Day Year

Phone ( ) \_\_\_\_ - \_\_\_\_ E-mail \_\_\_\_\_

*To Whom It May Concern:*

*This is to certify that I \_\_\_\_\_, have no contact with my parents because \_\_\_\_\_.*

*(i.e. my parents are deceased, I'm a ward of the state, my parents abandoned me, I don't know where my parents are, etc.).*

*If you have parents, regardless of your financial position, you must complete the Parent or Guardian Statement for Minor Claiming Emancipation form. This form is only used for students who have no parents or guardian.*

**INCOME INFORMATION**

Do you receive public assistance? (mark all that apply)  Food Stamps  Section 8 Housing  Child care assistance

**TYPE OF INCOME**

Earnings from work \$ \_\_\_\_\_  
Unemployment \$ \_\_\_\_\_  
TANF \$ \_\_\_\_\_  
Social Security disability \$ \_\_\_\_\_  
Other \_\_\_\_\_ \$ \_\_\_\_\_

Explain how you were able to support yourself or your family. (i.e. how did you pay your monthly expenses: rent/mortgage, food, etc.)

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

\* This form is for tuition purposes only.

**Notarized by** (This form **MUST** be notarized)

Signature \_\_\_\_\_ Date \_\_\_\_\_

Official Seal \_\_\_\_\_

**Office Use Only**

Received by \_\_\_\_\_ date \_\_\_\_\_

Processed by \_\_\_\_\_ date \_\_\_\_\_