ATTESTATIONS AND CERTIFICATIONS FOR ELIGIBILITY FORM

D. Declaration of Authority to Act on Minor Claimant's Behalf

*Please complete this Section **only** if you completed Part I.B and are submitting this claim on behalf of a minor.*

I hereby declare that the Claimant, _____ , is a minor and that I am legally authorized to act on the Claimant's behalf because: (sign one)

(1) I am the Claimant's parent, I have sole legal custody of the Claimant, and the Claimant does not have a legal guardian. I declare under penalty of perjury that the foregoing is true and correct.

Executed on this ☐☐ day of ☐☐☐☐☐☐☐☐☐, 201☐.

_____
Signature of Parent

(2) I am the Claimant's parent, I share legal custody or have joint custody of the Claimant with

_____ , and the Claimant does not have a legal guardian.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on this ☐☐ day of ☐☐☐☐☐☐☐☐☐, 201☐.

_____
Signature of Parent

I declare under penalty of perjury that the foregoing is true and correct.

Executed on this ☐☐ day of ☐☐☐☐☐☐☐☐☐, 201☐.

_____
Signature of other person with joint legal custody of Claimant

(3) I am the Claimant's legal guardian. I declare under penalty of perjury that the foregoing is true and correct.

Executed on this ☐☐ day of ☐☐☐☐☐☐☐☐☐, 201☐

_____
Signature of Guardian

(4) I am not the Claimant's parent but I have legal custody of the Claimant, the Claimant's parents do not have legal custody of the Claimant, and the Claimant does not have a legal guardian. I declare under penalty of perjury that the foregoing is true and correct.

Executed on this ☐☐ day of ☐☐☐☐☐☐☐☐☐, 201☐.

_____
Signature of Authorized Representative

_____
(Relationship to Claimant)