

2023-2024 Dependency Status Appeal Form

Student ID Number		Email:			
Student's Name:	s Full Legal				
(Please	print clearly)	Last	First	Middle	
		☐ First Dependency Appeal	OR		
calculate		lelines conside r undergraduate studer financial information. However, a st			
Allowable	e reasons includ	e such situations as abuse, abandonm	ent, or irreconcilable differences with	hin the family. These reasons are not a	
basis for	an appeal: stu	dent is self-supporting, parent refuses	s to pay for college, parent no long	ger claims the student on their taxes.	
Please al	low <u>two</u> weeks fo	or appeal processing.			
First Dependency Appeal-the following items are required for the appeal:					
1.	3 ' 1 3				
	a. the unusual circumstances,b. your relationship with your biological parents,				
		xplanation of where you expect t		ort for the next school year.	
2		. , , , , , , , , , , , , , , , , , , ,			
2.		letter from an independent 3 rd party source (ex. counselor, medical authority, clergy, court, agency) who can attest first-hand to your circumstances. This letter must include as much the situation as possible.			
3.	,	ot provide a letter from an indepe ubmit a signed letter from anothe	·	why in your appeal letter. You	
Yearly update-* Send this form and a NEW signed and dated personal statement attesting to your current relationship with both biological parents, where you live during school breaks, how you are financially supported, and the circumstances on which you sought independent status.					
If I purposely give false or misleading information, I may receive a fine, a prison sentence, or both. By signing this form, I certify that all information is complete and correct.					
Student Signature		D	Date		
		Electronic signature is not allowed			
(Please Note: Use the secure document uploader as we cannot open email attachments.)					