

Name:  PID#:

Email:  Phone #:

**A student under the age of 24 may be considered self-supporting only in unusual circumstances.**  
Completing this form does not guarantee that there will be changes to your financial aid status. A decision for your dependency appeal will apply to the 2026-2027 academic year. An appeal must be submitted for each year the student wishes to have their status evaluated.

**Circumstances that will not be considered:**

- Student is living at home (or with relatives) but paying rent
- Student has ongoing arguments with parent(s) and due to this the parent(s) have refused to help the student
- Student has chosen to leave parent(s) and put him or herself through college
- Parent(s) have chosen not to help with the student’s college expense or provide financial information
- Student lives with or has a step-parent who refuses to provide support or income information

Indicate below why you are submitting this appeal:	
	<p><b>Your parent(s) have been permanently declared incompetent by judicial action:</b></p> <ul style="list-style-type: none"> <li>• <b>Provide documentation, such as court orders, or notarized affidavits</b></li> <li>• <b>Provide a third-party letter:</b> signed statement from a professional on letterhead who is not a family member, substantiating your claim of independence. This can be a priest, rabbi, counselor, social services professional, medical professional, law enforcement officer, officer of the court, etc. <b>Third party letters not on letterhead will need to be notarized. All personal letters will need to be notarized.</b></li> </ul>
	<p><b>You are receiving public assistance:</b></p> <ul style="list-style-type: none"> <li>• <b>Provide documentation proving receipt of public assistance.</b> Public assistance does not include food stamps, unemployment compensation, or aid as a dependent child under the aid to families with dependent children (AFDC) program.</li> </ul>
	<p><b>You are receiving under your own name supplemental social security (SSI) or normal social security income.</b></p> <ul style="list-style-type: none"> <li>• <b>Provide evidence from social security officials.</b> This does <i>not</i> include social security benefits you are receiving due to a death of a parent (survivor’s benefits) or any other benefits received under your parents’ names.</li> </ul>
	<p><b>You have been rendered financially independent due to the involuntary dissolution of your family; resulting in relinquishment of your parent(s) responsibility and control.</b></p> <ul style="list-style-type: none"> <li>• <b>Examples of this include: abuse, abandonment, unfit living environment, etc.</b></li> <li>• <b>Provide documentation of the dissolution of your family, such as court orders, or notarized affidavits.</b></li> <li>• <b>Provide a Third Party Letter:</b> signed statement from a professional on letterhead who is not a family member, substantiating your claim of independence. This can be a priest, rabbi, counselor, social services professional, medical professional, law enforcement officer, officer of the court, etc. <b>Third party letters not on letterhead will need to be notarized. All personal letters will need to be notarized.</b></li> </ul>

