Print Your Name: __________________________  CCCC ID#: __________________________

Email address: __________________________  Phone: __________________________

Complete Part I (side 1) or Part II (side 2):
  Part I: Initial application for independent status
  Part II: Renew independent status approved in previous year.

Part I: Application for Independent Status

A. REASON FOR THE REQUEST:

The Financial Aid Office is required to consider parent information and expected parental contribution for students who are not independent according to the FAFSA definition. Exceptions are made only when adequate documentation of extenuating family circumstances exists.

Extenuating circumstances are generally defined by students’ inability to have contact with their parents. Review the extenuating circumstances below and check the one that best describes your circumstance.

Note: Appeals cannot be approved simply because you support yourself financially. There must be extraordinary circumstances (outside of your control) why you cannot provide parental information. You must attach documentation to support your request.

If your parents refuse to complete FAFSA and do not provide you any financial support, please request additional form.

Check:

____ 1. Severe circumstances within your family prevent you from obtaining your parental financial information. Examples:
   a.) an abusive home situation which is detrimental to your physical or mental well-being
   b.) abandonment by both parents
   c.) history of parental alcohol or drug abuse
   d.) incarceration of the custodial parent

____ 2. You have been raised by a grandparent or other relative without that person having legal guardian status.

____ 3. You have extenuating circumstances not described above which prevent you from having contact with your parents to obtain parental information for the FAFSA.
B. PERSONAL STATEMENT AND DOCUMENTATION:

- Attach a personal statement that completely and explicitly describes the basis for your request. Please note that your statement will be used only to determine if an exception should be made. The information will be held in strictest confidence. Make sure your statement is signed and dated.

- Your statement must describe your extraordinary circumstances in sufficient detail.
- Your statement should clearly indicate how you are supporting yourself financially due to your special circumstances.

- Attach at least two letters supporting your request for independence. For example if there is a teacher, counselor, employer, clergy person, therapist or social worker, etc. who knows your situation well, please ask them to write confirming your status. These letters should be signed and on agency letterhead.

C. STUDENT CERTIFICATION – Read carefully before you sign.

I certify that all information contained in this request for independent status, including my personal statement and other documentation, is true and complete to the best of my knowledge. I affirm that I have not knowingly or intentionally provided any false statements or fraudulent documentation. I understand that if I am found to have knowingly or intentionally given false or fraudulent statements and/or documentation, my request will be denied and my eligibility for all forms of student aid may be completely rescinded.

_____________________________________      _________________________
Your signature                        Today’s date

Part II: Renewal of Status Approved in Prior Year

A. INDEPENDENT STATUS RENEWAL CERTIFICATION:

I certify that the documentation submitted for a previous award year is still true and complete to the best of my knowledge.

_____________________________________      _________________________
Your signature                        Today’s date