Student Name:
Student ID:
Email:
Telephone:
Academic Year:



Unusual Circumstance, Dependency Status Appeal Form

Reconsideration of a student's dependency status from "dependent" to "independent" may be warranted if you fall into any of these categories related to no contact with your parents.

- Human trafficking, as described in the Trafficking Victims Protection Act of 2000 (22 U.S.C. 7101 et seq.).
- Legally granted refugee or asylum status.
- Parental abandonment or estrangement.
- Student or parental incarceration.
- An abusive family environment that threatens the student's health or safety.
- Homeless unaccompanied youth.
- Risk of homelessness.

You should not request this adjustment if you fall into the below circumstances. Instead, please complete your FAFSA as a dependent student and include both you and your parent(s)' information.

- Your parents refuse to contribute to your college expenses.
- Your parents refuse to supply the necessary information for FAFSA or FAFSA verification completion.
- You parents don't claim you as a dependent for federal tax filing.
- You demonstration complete financial self-sufficiency.

Documentation is required and may include (but is not limited to) the following:

- A documented interview between the student and the financial aid administrator;
- Submission of a court order or official federal or state documentation that the student or student's parents or legal guardians are incarcerated;
- A documented phone call or written statement, which confirms the unusual circumstances with:
 - o A state, county or tribal welfare agency;
 - O An independent living case worker who supports current and former foster youth with the transition to adulthood; or
 - O A public or private agency, facility, or program servicing the victims of abuse, neglect, assault, or violence.
- A documented phone call or written statement from an attorney, guardian ad litem, a court-appointed special
 advocate (or similar), or a representative of a TRIO or GEAR UP program which confirms the circumstances
 and the person's relationship to the student;
- A documented determination of independence made by a financial aid administrator at another institution in the same or a prior award year; or
- Utility bills, health insurance, or other documents that demonstrate a separation from parents or legal guardians.

_	rsonal statement below that e used only to determine if t confidence.	- • -	· · · · · · · · · · · · · · · · · · ·	· -
Date of Separation:	Mother			
	Father			
Please explain your cu divorced or separated:	arrent relationship with bot l :	h your biological ai	nd/or adoptive parent	even if they are currently
I hereby certify that personal statement a	Attached To This Form all information contained and other documentation of knowingly or intention	d in this appeal fo	r independent status plete to the best of m	s, including my y knowledge. I
fraudulent statemen	nderstand that if I am founts and/or documentation Institutional student aid v	n, my appeal will	be denied and my el	
Student Signature:			Date:	-
	– Capital University must ensure es. At least one acceptable source			
	om a professional is not possible, . Please have them state their rela			
level Direct Unsubsidized Lo The student's parents r	parents refuse to support them are no ban only. For a student to be eligible refuse to complete the FAFSA; and/o do not and will not provide any finan	for this provision the stu or	dent's parent(s) must docume	ent the following:
If the parent(s) refuse to sign sufficient), such as a teacher,	and date a statement to this effect, s counselor, cleric, or court.	tudents must provide doo	cumentation from a third part	y (the student is not
Office Use Only: Approv	ved: Denied:	Da	te:/	Aid Year:
Comments:				