



2026-2027 AWARD YEAR

Request for Unusual Condition

STUDENT INFORMATION

Last Name First Name M.I. Social Security Number

Street Address (include apt. no.) City State

Telephone Number (include area code) Date of Birth Email Address

TYPE OF UNUSUAL CONDITION REQUESTED

You have indicated that you or your family has unusual circumstances that might affect your financial aid eligibility. Please indicate the type of unusual circumstances you or your family have encountered.

_____ I am requesting to be considered independent and have my dependency status overridden by the school. I will submit a statement supporting the reasons why I am requesting this and have a third party write a statement in support of my circumstances.

The U.S. Department of Education has mandated that the following conditions, singly or in combination, **DO NOT** merit a dependency override and **WILL NOT** be considered:

- 1) Parents' refusal to contribute to your education
- 2) Parents' unwillingness to provide information on the FAFSA or for verification purposes
- 3) Parents do not claim you as a dependent for income tax purposes
- 4) You (student) demonstrate total self-sufficiency by not residing with parents.

Appeals will not be considered until the Student Financial Services Office has received all required documentation as noted below. If this appeal is approved, it is valid for subsequent years of enrollment unless your situation changes. Please allow up to 4 weeks for your appeal to be reviewed.

Signed Personal Statement

You have indicated that you or your family has unusual circumstances that might affect your financial aid eligibility. Please indicate the type of unusual circumstances you or your family have encountered.

Additionally, all of the following information must be explained in your statement.

- A detailed explanation of your current relationship with both of your parents. If you are estranged from your parents, provide a detailed account of the circumstances which led to the estrangement.
- When was the last time you spoke with your parents?
- When was the last time you resided with your parents?
- Where are you living (do you live with someone other than your parents)?
- How are you able to pay for living expenses such as rent, groceries, utilities, and insurance?
- Who claimed you on their 2025 Federal Income Tax Return?
- Who provides your health insurance?

Documentation

To substantiate your unusual circumstance, documentation may include (but is not limited to) the following:

- A death certificate confirming your parent(s) is deceased.
- A document confirming your parent(s) is institutionalized.
- A court order or official federal or state document confirming your parent(s) is incarcerated.
- A court document confirming someone other than your biological or adoptive parent(s) have been appointed your legal guardian.
- A court-ordered protective or restraining order that prohibits you from having contact with your parent(s).
- Other legal document confirming why parental information should not or cannot be obtained for financial aid purposes.
- Two signed letters on official letterhead confirming your unusual circumstance. The letters should come from two separate authoritative adults such as a welfare agency, case worker, law enforcement officer, attorney, mental health professional, high school or college counselor, or pastor detailing their direct knowledge of your unusual circumstance.
- A copy of your health insurance, dental insurance, and car insurance card showing coverage is in your own name.
- A copy of your mortgage statement or lease agreement verifying your residence is in your own name.
- A copy of your utility statement verifying your utilities are in your name

REQUIRED SIGNATURES

Student Signature _____

Date _____