

Student Name \_\_\_\_\_ Student ID # \_\_\_\_\_

Street Address \_\_\_\_\_

City, State, and Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ Email \_\_\_\_\_

If you are currently required to provide parent information on the FAFSA, but have an unusual circumstance which prevents you from doing so, this form can be used to submit an appeal. **Review the situations listed below and check the one which best describes your situation. You will also need to provide a letter fully explaining your situation and supporting documentation.**

Your appeal will be reviewed based on the documentation submitted and we will notify you of the results. Please be aware that proving self-sufficiency and living on your own are not adequate reasons for changing your dependency status and cannot be considered as an appealable circumstance. Completing this form and providing documentation does not guarantee that a change will be made.

If your parents will not provide financial and non-cash support to you, and refuse to complete the FAFSA, you may be eligible to receive federal direct unsubsidized loans only. You will need to complete the Request for Dependent Student to Receive Unsubsidized Loans Only, available in our office or at [www.schoolcraft.edu/aid/forms-documents/](http://www.schoolcraft.edu/aid/forms-documents/).

- ☐ **I was determined to be independent by another institution for FAFSA purposes and my situation has not changed.**

Submit a signed letter, on official letterhead, from that institution.

- ☐ **I was previously approved to be independent by Schoolcraft College and my situation has not changed.**

- ☐ **There has been a breakdown in my family structure due to physical abuse, emotional abuse, substance abuse and/or abandonment or neglect.**

Submit a letter from you, fully explaining your situation **and** one or more of the following:

1. Court documents
2. Letter (on official letterhead) explaining the situation in detail from a clergy member, social worker, psychologist, high school counselor, teacher, doctor, social agency or other counseling professional
3. Police report

- ☐ **My custodial parent has died and my other parent is still living. However, I have had no contact with my living parent (including financial support) for a significant period of time.**

Submit a letter from you, fully explaining your situation and **ALL** of the following:

1. A copy of the death certificate for the deceased custodial parent; **and**
2. Documentation of the custodial relationship (i.e., a court document, a copy of the divorce decree, or other evidence) showing that the deceased was the custodial parent; **and**
3. Letter (on official letterhead) from a clergy member, social worker, psychologist, high school counselor, teacher, doctor, social agency, or other counseling professional, which supports the claim of not having lived with nor received financial support from the non-custodial parent.

- ☐ **I have been determined on or after July 1, 2022, to be homeless by my high school or a shelter.**

Please do not submit this form. Complete and submit the Dependency Status Verification Form.

- ☐ **I am an unaccompanied youth who is homeless or at risk of being homeless.**

Complete and submit the Unaccompanied Homeless Youth Verification Form.

- ☐ **My situation does not fit those listed above.**

Submit a letter from you, fully explaining your situation and why you are requesting a change from dependent to independent and documentation that supports your request and explains your situation.

**I certify that all of the information on this form and accompanying documents are complete and correct.**

Student Signature \_\_\_\_\_ Date \_\_\_\_\_