

## 2024-25 STUDENT UNUSUAL CIRCUMSTANCE FORM

Student Name	Student ID #
form can be used to submit an appeal. Review the situations need to provide a letter fully explaining your situation and so Your appeal will be reviewed based on the documentation sul	omitted 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 circumstance. Completing this form and providing documents	or changing your dependency status and cannot be considered as an appealable ation does not guarantee that a change will be made.
	t to you, and refuse to complete the FAFSA, you may be eligible to receive federal direct est for Dependent Student to Receive Unsubsidized Loans Only, available in our office or
☐ I was determined to be independent from another institu	ation for FAFSA purposes and my situation has not changed.
Submit a signed letter, on an official letterhead, from	
$\ \square$ I was previously approved to be independent by Schoold	aft College and my situation has not changed.
· · · · · · · · · · · · · · · · · · ·	to physical abuse, emotional abuse, substance abuse and/or
abandonment or neglect.	
Submit a letter from you, fully explaining your situat	ion <u>and</u> one or more of the following:
1. Court documents	a situation in datail from a clarge mamber social worker psychologist, high school
<ol><li>Letter (on official letterhead) explaining th counselor, teacher, doctor, social agency, o</li></ol>	e situation in detail from a clergy member, social worker, psychologist, high school
3. Police report	other counseling professional.
(including financial support) for a significant period.  Submit a letter from you, fully explaining your situat	
<ol> <li>A copy of the death certificate for the dece</li> </ol>	
the deceased was the custodial parent; <u>an</u>	
	member, social worker, psychologist, high school counselor, teacher, doctor, social which supports the claim of not having lived with nor received financial support from
☐ I have been determined on or after July 1, 2022, to be ho	meless by my high school or a shelter.
Please do not submit this form. Complete and subm	
☐ I am an unaccompanied youth who is homeless or at risk	of being homeless.
Complete and submit the Unaccompanied Homeless	s Youth Verification Form.
☐ My situation does not fit those listed above.	
	ion and why you are requesting a change from dependent to
independent and documentation that supports you	request and explains your situation.
l certify that all the information on this form and acco	npanying documents are complete and correct.
Student Signature	Date