

2025-26 STUDENT UNUSUAL CIRCUMSTANCE FORM

| Student Name Student ID # | |
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| If you are currently required to provide parent information on the FAFSA but have an unusual circumstance which prevents you from doing so, t form can be used to submit an appeal. Review the situations listed below and check the one which best describes your situation. You will als 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 unsubsidized loans only. You will need to complete the Request for Dependent Student to Receive Unsubsidized Loans Only, available in our off at www.schoolcraft.edu/aid/forms-documents/ . | |
| ☐ I was determined to be independent from another institution for FAFSA purposes and my situation has not changed. Submit a signed letter, on an 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 <u>and</u> one or more of the following: | |
| Court documents 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. | I |
| 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. | |
| Submit a letter from you, fully explaining your situation and <u>ALL</u> the following: | |
| A copy of the death certificate for the deceased custodial parent; <u>and</u> | |
| 2. Documentation of the custodial relationship (i.e., a court document, a copy of the divorce decree, or other evidence) showing | ig that |
| the deceased was the custodial parent; <u>and</u> | |
| 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 fro the non-custodial parent. | |
| ☐ 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. | |
| NOTE: The US Department of Education <u>does not</u> allow the school to make students independent based solely on the following reasons; stud self-supporting, parent(s) will not provide information on the FAFSA or for verification, parent(s) do not claim the student as a dependent for income tax purposes, parent(s) refuse to contribute to the student's education. | |
| If your explanation will disclose incidents of sexual misconduct (including but not limited to sexual assault, sexual harassment, stalking, dating violence, domestic violence) that information will be forwarded to our Title IX Coordinator via our SC Aware reporting process. You will receive an email providing an opportunity to meet, access resources, and to provide additional information which the college is required to send. You will not be required to provide any additional information about your situation. Additionally, if you would like to spread to a mental health specialist for support, you can request an appointment wour Student Support Specialist at 734-462-4486 or by emailing studentrelations@schoolcraft.edu | |
| I certify that all the information on this form and the accompanying documents are complete and correct. | |
| Student Signature Date | |