

This form is designed to evaluate an individual student's own circumstances and determine whether he/she should be considered an "independent" student for financial aid purposes. The Department does recognize exceptions to this rule, and allows financial aid administrators the right to waive the criteria in extreme circumstances. In order to be considered independent, a student must prove his/her circumstances with documentation.

If you have experienced abandonment, abuse, neglect, or the like, you may petition for independent status. All of the information gathered by the Financial Aid Office will remain strictly confidential. Be advised that the Financial Aid Office will be reviewing the documentation, but not all requests are approved. Failure to provide any information requested will be considered an automatic denial.

Some circumstances, listed below, automatically qualify you as an independent student.

Therefore, do not complete this form if :

- 1) at anytime since you turned age 13, both your parents were deceased, you were in foster care or you were a dependent or ward of the court,
- 2) you are or you were an emancipated minor as determined by a court in your state of legal residence at the time you received that determination,
- 3) you are or you were in legal guardianship as determined by a court in your state of legal residence at the time you received the determination,
- 4) at any time on or after July 1, 2010, your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless,
- 5) at any time on or after July 1, 2010, the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless, or
- 6) at any time on or after July 1, 2010, the director of a runaway or homeless youth basic center or transitional living program determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless.

If you meet one of the above circumstances, complete your FAFSA without parent information at www.fafsa.ed.gov.

The following circumstances are not approved or considered reasons for independent status:

You do not reside with your parents, your parents refuse to pay for your college education, your parents are not financially able to pay for your college education, you were married AFTER you applied for financial aid, or you do not want your parents' assistance to pay for college.

All decisions based on this request are final.

Required information:

1. **Personal Statement.** Attach a personal statement describing your situation. You **must** describe your current relationship (even if it is non-existent) with your father and mother.
2. **Legal documentation** verifying reasons for your independent status request. This may include, but is not limited to:
 - Documentation confirming that there is a restraining order that prohibits you from having contact with your parents.
 - Other legal documentation that would explain why parent information should or could not be obtained to determine financial aid eligibility.

OR

Two professional letters verifying reasons for your independent status request.

Professional letters must be on official letterhead, and from a professional adult whom is able to verify the family circumstances you described in your personal statement. Professional adults can include: clergy members, guidance counselors, teachers, professors, doctors, family counselors, mental health professionals and law enforcement officers.

3. **Personal support statement.** Please complete the estimated expenses worksheet (see reverse) and attach a copy of your 2010 Federal Tax Return (if completed) and W-2 forms. You may be asked to provide additional financial documentation if needed.
4. **Free Application for Federal Student Aid (FAFSA).** You must complete the FAFSA application at www.fafsa.ed.gov. Please make sure to list SVSU on your form. Our Federal Code is 002314. You are encouraged to file the application as soon as possible and you **DO NOT** have to submit this form first.

Certification and Authorization:

- I certify that all of the information provided on this form is complete and correct to the best of my knowledge.
- I understand that I may be asked to submit additional documentation if necessary.
- I realize that if I do not fully prove my request for independent status, this form may be denied and that all decisions are final.
- I understand that all information I provide will remain confidential.

Student Name - Printed

Social Security Number

Student Signature

Date

Estimated Resources/In-Kind Support Independent Students

-The FAFSA asks for the amount of money paid on your behalf in the Worksheet B portion of the application. Please complete the following table and signature area and return it to our office so we may verify your income.

-If you had income from *work* in 2010, please submit your W-2 statements.

-If you filed a federal tax return for 2010, please submit a signed copy of that tax return.

-If you have additional comments about your situation or income resources, please attach another sheet.

2010 Student Income Resources	Amount (amt received for the year 2010)	Source (i.e. Work, State, Parents, etc.)	2010 Student Expenses	Amount (amt per month)
<i>If you received no income, see the statement below*</i>				
Income from work - <i>not included on a W-2 statement</i>	\$		Rent/Mortgage	\$
Rental income from properties	\$		Utilities	\$
ADC (including child care)	\$		Food	\$
Child Support/Alimony	\$		Automobile Payment	\$
Social Security Benefits	\$		Medical/Dental	\$
Food Stamps	\$		Clothing	\$
Subsidized Housing	\$		Insurance (Health/Auto)	\$
Pension	\$		Tuition/Books	\$
Unemployment	\$			
Worker's Compensation	\$		Miscellaneous:	\$
Military Allowance	\$			
Other Income/Resources (How much others may have paid on your behalf for clothing, food, automobile payments or insurance, spending money, etc.)	\$			
Financial Aid (Loans, grants, scholarships, etc.)	\$			
Total	\$	XXXXXXXXXX	Total	\$

By checking this box, I am certifying that I have had no financial support or assistance for the 2010 year. I have had nothing paid on my behalf and have been totally self-supporting.

Certification: I (We) certify that the information above is true and accurate to the best of my (our) knowledge.

Student Signature

Date

Primary Financial Supporter Signature

Date

Relationship