



2025-26 Unusual Circumstances Form

Student Name: _____

Student ID: _____

Federal financial aid regulations assume that the family (student and parent) have primary responsibility for a student's educational costs. In certain instances, the federal government allows a student to appeal to have their parent's responsibility removed.

Appealable Circumstances	Non-Appealable Circumstances
Human Trafficking – as described in the Trafficking Victims Protection Act of 2000	Parents refuse to contribute to the student's education
Legally granted refugee or asylum status	Parents will not provide information for the FAFSA or verification
Parental abandonment or estrangement	Parents do not claim the student as a dependent for income tax purposes
Student or parental incarceration	Student demonstrates total self-sufficiency

SECTION A:

Were you approved independent status during the 2024-25 academic year? Yes No
 If yes, have your circumstances changed? Yes No
 If yes, please proceed to section B.
 If no, please sign and date this form and submit it to the Office of Financial Aid.

SECTION B: As part of your appeal, please include the following:

- Explain what unusual circumstances should make you an independent student. Be detailed in your explanation. Also include the last contact with each biological parent (when, how, the nature, and the frequency).
- Explain how you have been self-supporting. What month and year did you start meeting your expenses without parental support?
- Submit copies of your 2023 and 2024 W-2s and Federal Income Tax Returns, including Schedules 1, 2, 3, C, and SE.
- Provide two statements from a professional such as clergy, medical professional, caseworker, police officer, high school counselor, etc. Copies of appropriate court documents, medical records, police reports are acceptable substitutions for professional statements.
- Provide asset information:

Asset Type	Amount as of date FAFSA was Filed
Child Support Received	\$
Cash	\$
Net Worth of Investments	\$
Net Worth of Bus/Farm	\$

Certify below: I have attached statements from the following persons (name, job title, and relationship to you):

1) _____

2) _____

I certify that the information provided in this appeal is true and correct:

Student Signature _____

Date _____