

Dependency Status Appeal 2024-2025

Studer	nt Name:				Student ID:		
	e complete this f mentation will no	•	•	quired documer	ntation. Appeal	s that do not include the required	
As of t	As of today, are you 18 years of age or older?				Yes	No	
Have y	ou previously app	ealed your deper	idency status at	ESCC?	Yes	No	
<u>Descr</u>	ription of Depend	dency Status					
	e provide a detailed ovide parental info					nclude the reason for why you are not able	
Please	e note that the foll	owing reasons ar	e NOT appropria	te basis for an app	peal of your depe	endency status:	
•	Parents are unParents do no	nwilling to provid	le information on the information of the informatio	ducational expen on the FAFSA or fo ent for income tax	r verification.		
Parenta	al Information						
What is y	your <u>father's</u> curre	ent marital status	? Please circle or	ne:			
ngle	Separated	Married	Divorced	Widowed	Unknown		
۷hat is ۷	your <u>mother's</u> curr	rent marital statu	s? Please circle o	one:			
ngle	Separated	Married	Divorced	Widowed	Unknown		

CONTINUED ON OTHER SIDE

Father's Name:	Telephone:
Father's Address:	
Mother's Name:	Telephone:
Mother's Address:	
Parental Information (continued)	
Please answer the following questions:	
Did you live with a parent during the 2024 calendar year?	YesNo
f no, when did you last live with a parent?	
Date of last contact with parent(s)	
Do you receive financial support or gifts from your parent(s)?	Yes No
f yes, please list the approximate value of support received last y	/ear:
Employment History	
Are you currently employed?Yes	No
f no, please describe how you meet your current living expenses:	:
Supporting Documentation	
Notarized letter from student detailing your situation, i	including why parent information cannot be provided.
 If you are currently employed, please provide a letter for each week, and current hourly rate. 	rom your employer indicating the average number of hours that you wo
situation. Examples of an acceptable third-party source government agencies, medical personnel, courts, or pri administrator, etc. This person should present only the should not take the form of a personal recommendation	separate third-party sources confirming your statements regarding your e may include: counselors or teachers, clergy, community groups, ison administrators, human services agent, homeless shelter afacts and details considered necessary to verify your statements. This on or request for financial aid assistance, but rather should only address at living situation. Letters must be printed on third party agency letterhead is appeal.
Legal documents that support the statements you have	e made regarding your situation (court documents, death certificate, etc.
	true and correct and that I am providing an accurate description of my or misleading information could result in a fine, imprisonment or both a nt of Education.
Signature	Date

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List of Included Items:

Notarized letter from the student	 Yes		
Court documents granting custody to someone other than t	 Yes	Nc	
Copy of death certificate of student's parent(s)	 Yes	Nc Nc Nc Nc Nc	
Two <u>notarized</u> letters confirming student's statements	 Yes		
Independent Student Household Verification form for 2024	 Yes		
Student's Federal Tax Transcript for 2022	 Yes		
IRS Statement of Non-filing for 2022	 Yes		
Independent Student Verification of Non-filing for tax year 2	 Yes	Nc	
Reviewed by Coordinator Initials	Date		
Scanned and sent to Central Financial Aid Initials	Date		

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