Unusual Circumstances 2024-2025

Student Name: _______________________________  Student ID: ___________________

Please complete this form entirely and provide all required documentation. Appeals that do not include the required documentation will not be considered.

As of today, are you 18 years of age or older?  Yes  No

Have you previously appealed your dependency status at Eastern Shore Community College?  Yes  No

Description of Dependency Status

Please provide a detailed explanation of the circumstance that is the basis for this appeal. Include the reason why you are not able to provide information for both your biological father and biological mother on the Free Application for Federal Student Aid.

Please note that the following reasons are NOT appropriate basis for an appeal of your dependency status:

• Parents refuse to contribute to the student’s educational expenses.
• Parents are unwilling to provide information on the FAFSA or for verification.
• Parents do not claim the student as a dependent for income tax purposes.
• Student demonstrates total self-sufficiency.

________________________________________________________

________________________________________________________

________________________________________________________

Parental Information

What is your biological father’s current marital status? Please circle one:

Single  Separated  Married  Divorced  Widowed  Unknown

What is your biological mother’s current marital status? Please circle one:

Single  Separated  Married  Divorced  Widowed  Unknown

Biological Father’s Name: _______________________________ Telephone: __________________

Biological Father’s Address: ______________________________

Biological Mother’s Name: _______________________________ Telephone: __________________

Biological Mother’s Address: ______________________________

CONTINUED ON OTHER SIDE
Parental Information (continued)

Please answer the following questions:

Did you live with a parent during the 2024 calendar year?  ____Yes  ____No

If 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

If yes, please list the approximate value of support received last year:

Employment History

Are you currently employed?  ______  Yes  ______  No

If no, please describe how you meet your current living expenses:

Supporting Documentation

• Notarized letter from student detailing your situation, including why information for both biological father and biological mother cannot be provided.

• If you are currently employed, please provide a letter from your employer indicating the average number of hours that you work each week, and current hourly rate.

• Please provide at least two notarized letters from two separate third-party sources confirming your statements regarding your situation. Examples of an acceptable third-party source may include: counselors or teachers, clergy, community groups, government agencies, medical personnel, courts, or prison administrators, human services agent, homeless shelter administrator, etc. This person should present only the facts and details considered necessary to verify your statements. This should not take the form of a personal recommendation or request for financial aid assistance, but rather should only address the circumstances surrounding your history and current living situation. Letters must be printed on third party agency letterhead. These letters must be notarized and submitted with this appeal.

• Legal documents that support the statements you have made regarding your situation (court documents, death certificate, etc.).

My signature certifies that the information in this appeal is true and correct and that I am providing an accurate description of my personal situation. I understand that purposely giving false or misleading information could result in a fine, imprisonment or both as it relates to my reporting information to the U.S. Department of Education.

Signature ___________________________ Date ___________________________

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FOR OFFICE USE ONLY

List of included items:

Notarized letter from the student  ______ Yes  ______ No

Court documents granting custody to someone other than the student’s parents  ______ Yes  ______ No

Copy of death certificate of student’s parent(s)  ______ Yes  ______ No

Two notarized letters confirming student’s statements  ______ Yes  ______ No

Independent Student Family Size Verification form for 2024-25  ______ Yes  ______ No

Student’s Federal Tax Transcript for 2022  ______ Yes  ______ No

IRS Statement of Non-filing for 2022  ______ Yes  ______ No

Independent Student Verification of Non-filing for tax year 2022  ______ Yes  ______ No

Reviewed by Coordinator  Initials/Date: ________________________________