

## **Unusual Circumstances 2025-2026**

Student I	Name:			,	Student ID:	
Please c	omplete this for	m entirely and	provide all requi	ired documentat	on. Appeals that do not include the require	d
documer	ntation will not b	e considered.				
As of	today, are you 18 y	ears of age or o	lder? _ Yes _ No			
Have	you previously app	ealed your depe	endency status at	Eastern Shore Con	nmunity College? _ Yes _ No	
Desci	ription of Depen	dency Status				
	•	•			or this appeal. Include the reason why you are no the Free Application for Federal Student Aid.	ot able to
Please	e note that the foll	owing reasons a	re NOT appropria	te basis for an app	eal of your dependency status:	
,	• Parents refuse	e to contribute t	o the student's e	ducational expens	es.	
				n the FAFSA or for		
		ot claim the stud constrates total so	=	ent for income tax	purposes.	
	5 Student demi	Distrates total si	en-sufficiency.			
-						
<u>Parenta</u>	al Information					
What is	your biological <u>fatl</u>	<u>ner's</u> current ma	rital status? Pleas	se circle one:		
Single	Separated	Married	Divorced	Widowed	Unknown	
What is	your biological <u>mo</u>	ther's current m	arital status? Plea	ase circle one:		
Single	Separated	Married	Divorced	Widowed	Unknown	
Biological Father's Name:				phone:		
Biological	Father's Address:					
Biological	Mother's Name:_			Tele	phone:	
Biological	Mother's Address	:				

654.40.06

**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)?YesI	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			
<ul> <li>Notarized letter from student detailing your situation, including why info cannot be provided.</li> </ul>	ormation for both biolo	gical father and biologica	l mother
<ul> <li>If you are currently employed, please provide a letter from your employ each week, and current hourly rate.</li> </ul>	er indicating the averag	ge number of hours that y	ou work
situation. <b>Examples</b> of an acceptable third-party source <b>may</b> include: co			
government agencies, medical personnel, courts, or prison administrator etc. This person should present only the facts and details considered new form of a personal recommendation or request for financial aid assistant surrounding your history and current living situation. Letters must be probe notarized and submitted with this appeal.  • Legal documents that support the statements you have made regarding	cessary to verify your s ce, but rather should o inted on third party ago	tatements. This should no nly address the circumsta ency letterhead. These let	ot take the ances tters must
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