

## FINANCIAL AID/VETERAN SERVICES/SCHOLARSHIPS PETITION FOR INDEPENDENT STATUS 2015-2016

### This form must be completed every academic year.

The U.S. Congress and Department of Education determine the criteria which identifies a student as dependent or independent of their parents for financial aid purposes. Generally, how an applicant responds to the questions in "Step Two" on the Free Application for Federal Student Aid (FAFSA) determines dependency status.

### Will you answer "NO" to all of the following questions in "Step Two" on the FAFSA?

I was born before January 1, 1992.

I am serving on active duty in the U.S. Armed Forces.

Since I turned age 13, both of my parents were deceased.

I was a dependent or ward of the court since turning age 13.

I am married.

I am a veteran of the U.S. Armed Forces.

I was in foster care since turning age 13.

I am currently or I was an emancipated minor.

I will be working on a master's or doctorate program (e.g., MA, MBA, MD, JD, PhD, EdD, graduate certificate).

I have children and I provide more than half of their support.

I have dependents (other than children or my spouse) who live with me and I provide more than half of their support.

I am currently or I was in legal guardianship.

I am homeless or I am at risk of being homeless. At any time on or after July 1, 2014, did 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 all your answers were "NO", but you feel there are extenuating circumstances which warrant your being considered independent of your parents, you may explain those circumstances in this petition.

You, the student, must provide three (3) letters of support from community members who have specific knowledge of the circumstances which have resulted in your belief that you are independent of your parents. Acceptable letters of support are from such sources as clergy, high school counselors, professional counselors, lawyers, or teachers. Letters must be notarized and include the length of the relationship with the student, contact phone numbers, and addresses and when appropriate on letterhead.

#### **CAUTION**

Conditions that the federal government has identified which, individually or in combination with one another, do not qualify as "extenuating circumstances", and do not merit a dependency override are listed below:

- 1. Parents refusing to contribute to the student's education;
- 2. Parents unwilling to provide information on the application or for verification;
- 3. Parents not claiming the student as a dependent for income tax purposes; and
- 4. Student demonstrating total self-sufficiency.

## Petition to be Declared an Independent Student Student Check Sheet

•	Provide Your Name and SSN#.	
•	Official birth certificate of student.	
•	Provide each of your parent's names and their address(es).	
•	Describe your last date of contact with each parent.	
•	Explain unusual circumstances to establish your independence.	
•	Describe how and when you met expenses without parental support.	
•	Complete and sign the 2015-2016 Independent Verification Document (V6).	
•	Signed copies of your parents' (or stepparents') 2014 federal income tax transcript.	
•	Signed copy of your 2014 federal income tax transcript.	
•	Documentation of any income or resources received in 2014 that are not on your tax return. If not required to file taxes, attached copies of all your W-2s.	
•	Documentation of income or resources received to date in 2015 (Check stubs with year to date information).	
•	Documentation of where you lived since January 2014 (e.g., signed lease agreements, housing contract, etc.).	
•	Attach copies of court documents that serve to support your circumstances	
•	Sign and date all required forms.	

## **FOR STUDENT USE**



Return completed form to: Financial Aid/Veteran Services/Scholarship Office 1000 College Blvd. Pensacola, FL 32504

> Approximate Value: \$ \_\_\_\_\_ Approximate Value: \$ \_\_\_\_\_

Financial/Other Support from Parent(s)/Stepparent(s) (Must complete with a dollar amount.	Financial/	Other S	upport from	Parent(s)	/Stepparent(s)	(Must com	plete with a	dollar amount.
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1)	What amount of financial support did you receive from your parent(s)/stepparent(s) in 2014? \$
2)	What amount of financial support will you receive from your parent(s)/stepparent(s) in 2015? \$
3)	What other support do you receive from your parent(s)/stepparent(s)? (Examples: health or auto insurance
	room and board, clothing, use of a vehicle, etc.)
	List the type of other support received and its approximate value:
	Type: Approximate Value: \$

### Please submit the documentation listed below with this petition:

- A completed and signed Independent Verification Document.
- <u>Signed</u> copies of your parents' (or stepparents') 2014 federal income tax transcript.
- Signed copy of your 2014 federal income tax transcript.
- Documentation of any income or resources received in 2014 that are not on your tax return.
- Documentation of income or resources received to date in 2015 (Check stubs with year to date information)
- Documentation of where you lived since January 2014 (e.g., signed lease agreements, housing contract, etc.)
- Official birth certificate of student

Birth/Step/or Adoptive Mother's Full Name	
•	Print Last/First/Middle
Birth/Step/or Adoptive Father's Full Name	
	Print Last/First/Middle

NOTE: For your petition to be considered, you must not have been claimed as a tax exemption by a parent or stepparent in 2014. Your parent(s)/stepparent(s) may not have used you as the basis to file income taxes as "head of household."

#### **Student Statement**

You, the student, must provide a written statement, on the attached form, that includes specific information and any court records which may support your independence for federal financial aid purposes. You must include the last contact you had with each parent, including the circumstances and dates of that contact.

Student Statement (Please sign and date any and all pages submitted).

By signing this worksheet, I hereby certify that the information I have submitted is true and correct.

Student's Printed Name	Student's Signature	PSC ID
@students.Pensacolastate.edu		
E-mail Address	Telephone No.	Date Signed

Pensacola State College is an Equal Opportunity/Affirmative Action institution. Pursuant to the Americans with Disabilities Act, if you require this information in alternative format or have special needs, please contact the Financial Aid/Veteran Services/Scholarships for assistance.

Rev. 10/14



# **Student Statement**

Student Signature	Student ID#	Date