

2018-2019 DEPENDENCY APPEAL FORM

When you apply for financial aid, answers to certain questions on the Free Application for Federal Student Aid (FAFSA) will determine whether you need to provide parental information (see Section 2 – Dependency Status of the 2018-2019 FAFSA on the Web Worksheet at www.fafsa.ed.gov). Students who answer no to all questions in Section 2 – (Student) are classified as dependent. The federal student aid programs are based on the idea that the parent(s) of traditional college age students have the primary responsibility for paying for their child's post-secondary education if they can financially afford to do so. Proving self-sufficiency, living on your own, or you do not want your parents' assistance and have decided to pay for your own college education are not sufficient reasons for changing the dependency status. However, under certain circumstances Central State University may be able to grant a dependency override to a student who cannot answer YES to any of the questions in Section 2 of the 2018-2019 FAFSA on the Web Worksheet. To make that determination you need to check the appropriate circumstance below and submit this form to the Financial Aid Office with required documentation. Submission of this appeal form does not guarantee a favorable change in your dependency status. The decision of the Financial Aid Office at Central State University is final and cannot be appealed to the U.S. Department of Education. **A Dependency Status Appeal Form must be submitted each year an appeal is requested.**

Please be aware that the following instances do **NOT** merit a dependency status change, either alone or in combination:

- Parents refuse to contribute to the student's education;
- Parents are unwilling to provide information on the Free Application for Federal Student Aid (FAFSA) or for verification;
- Parents do not claim the student as a dependent for income tax purposes;
- Student demonstrates total self-sufficiency.

Students classified as dependent may petition to be reclassified as independent based upon documented adverse family circumstances. The criteria used to determine a student's dependency status for federal financial aid purposes are established by the U.S. Department of Education. If you can answer yes to any one of the following questions, you will automatically be considered an independent student and will not need to file an appeal:

1. Were you born before January 1, 1995?
2. As of today, are you married? (also answer "Yes" if you are separated but not divorced)
3. Are you currently serving on active duty in the U.S. armed forces for purposes other than training?
4. Are you a veteran of the U.S. armed forces?
5. Do you now have—or will you have—children who will receive more than half of their support from you between July 1, 2018 and June 30, 2019?
6. Do you have dependents (other than your children or spouse) who live with you and who receive more than half of their support from you, now and through June 30, 2019?
7. At any time since you turned age 13, were both your parents deceased? Answer yes, for biological or adoptive parents, even if you are now adopted.
8. At any time since you turned age 13, were you in foster care? Answer yes even if you are no longer in foster care as of today.
9. At any time since you turned age 13, were you declared a dependent or ward of the court? Answer yes even if you are no longer a dependent or ward of the court as of today.
10. Are you or were you an emancipated minor as determined by the court in your state of legal residence? Answer no if you are still a minor and the court order is no longer in effect or the court's decision was not in effect at the time you became an adult.
11. Are you or were you in legal guardianship as determined by a court in your state of legal residence? Answer no if the court order is no longer in effect or was not in effect at the time you became an adult.
12. At any time on or after July 1, 2017, did your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless?
13. At any time on or after July 1, 2017, did the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless?
14. At any time on or after July 1, 2017, 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?

Check One

- I have applied for, and was granted Independent Student Status at CSU in a previous year, and would like to RENEW my status as Independent. (complete Sections A through E)
- I am submitting the Dependency Appeal form for INITIAL consideration during the 2018-2019 academic year. (Complete ALL Sections)

Submit the Dependency Appeal form and ALL supporting documentation to:

Central State University
Office of Student Financial Aid
1400 Brush Row Road Wilberforce, OH 45384-1004
FAX 937-376-6519 email: financialaid@centralstate.edu

Complete All Items Below – Please print clearly

**PERSONAL
INFORMATION**

Last Name:	First Name:
ID Number:	E-mail Address:
Contact Phone Number:	
Home Address (number and Street):	
City/State:	Zip Code:

Instructions:

Complete and submit this form. After your request and your documentation are reviewed, we will notify you in writing of the results of your appeal.

Include:

1. **Personal Statement:** Write and attach a letter detailing the circumstances under which you are appealing to be considered an independent student. Be assured all information you provide will be held confidential.
2. **Third Party Documentation:** Provide statements from two (2) third-party references who are **not** family members which verify the unique family circumstances you described. Third-party references include clergy members, counselors, social workers, physicians or law enforcement officers.

Signature

Certification: I certify that the information provided to support this appeal is true and correct. I understand that failure to provide documentation will result in a denial, and that an appeal does not guarantee an override of my dependency status.

Student's Signature: _____ **Date:** _____

To Be Completed By Student Financial Aid

Approved _____ Denied _____

Approved/Denial Signature _____ Date _____

Changes Reflected in Banner _____

Student notified: _____