

2024-2025 Request for Independence

Student's Name: _____ Student ID: _____

Student's Address: _____

This form is for students who filed the FAFSA as independent or do not meet the standard federal independence criteria as noted in Step 3 of the FAFSA and feel that they have special circumstances that should be taken into consideration. *Please note that this form **cannot** be used to request independence status for the NYS TAP award. This must be done separately through HESC as the criteria is different. Please file your TAP application and schedule an appointment with HESC at <https://www.hesc.ny.gov/contact-hesc.html>*

Returning students are only required to complete Section A only (unless situation has changed)
All other students must also complete Sections B & C.

Section A- Check all that apply

- Check here if this is your first year requesting independent student status
- Check here if you were granted independent status for the 2023-2022 academic year at SUNY Cobleskill.
- Check here if your situation has not changed and you are again requesting independent status for 2024-2025.
- Check here if you are now living with, or reconciled with, your parents.
 - In this case you need to complete the FAFSA with their information

Please sign certification block at end of form.

Please note:

The following circumstances **do not qualify independent student status:**

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

Things that may warrant independence:

- Documented abandonment, deceased parent(s), Homelessness (or risk of homelessness), Foster care or ward of the court.
- Active duty military
- Proof of dependent child(ren)
- Legal Guardianship

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Your documentation must support an extenuating or unusual circumstance. These examples listed are only a guide and are not all that will be considered. If you submit documentation on your circumstance, it will be reviewed.

Section B

Extenuating Circumstances:

Indicate the month and year that you last lived with your parents. ____/____

Please explain, on a separate sheet of paper, the reason(s) you do not live with your parents. If you left your parents household and the extent of contact you have with both mother and father at this time. In this letter, please indicate where and with whom you are currently residing and how you are being supported.

Section C

Additional Documentation Required:

- ✓ At least two letters from reliable third parties who can back up your request. The parties writing on your behalf must be professionals who have first-hand knowledge of your situation and be able to describe it fully. (*Reliable third parties are adults who are familiar with your situation such as a counselor, clergy, teacher, attorney or school counselor.*)
 - ✓ Any other documentation that you would like to submit to support your request. (Examples include, police reports, court papers, etc...)
 - ✓ Your completed FAFSA. You may leave parent section blank until the independency status is determined.

If you have any questions please call the Student Financial Services Office at (518) 255-5623.

ALL students must sign the certification below:

I certify that all information provided in this document is true, complete and accurate to the best of my knowledge. I further understand that any false statement or misrepresentation will be cause for denial, reduction, withdrawal, and/or repayment of financial aid. I authorize SUNY Cobleskill to make any change(s) necessary as a result of the updated information that I have provided.

Student Signature: _____

Date: _____