

2017-2018 Request for Independence

Student's Name: _____ Student ID: _____

Student's Address: _____

This form is for students who do not meet the 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 in Albany as the criteria is different.*

Returning students complete this Section A only (unless situation has changed):

Section A

- ☐ Check here if you were granted independent status for the 2016-2017 academic year at SUNY Cobleskill.
- ☐ Check here if your situation has not changed and you are again requesting independent status for 2017-2018.
- ☐ 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.

All other students complete Sections B & C.

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 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.

2017-2018 Request for Independence Consideration

Section C

Additional Documentation Required:

- ✓ At least 2 letters from reliable third parties who can back up your request. The parties writing on your behalf must 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, school counselor or adult relative other than your parents*). At least one of the two letters must be from a professional.
- ✓ 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.

Please note that federal guidelines regarding dependency overrides clearly indicate that the following situations do not qualify as extenuating circumstances and therefore would not result in a dependency override.

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 students as a dependent for income tax purposes.
4. Student demonstrating total self-sufficiency.

Your documentation must support an extenuating or unusual circumstance that is not included above. (Examples may include students who have no contact with their parents due to circumstances beyond their control and students leaving an abusive household) These examples are only a guide and are not all that will be considered. If you document your circumstances, it will be reviewed. You will receive a decision in writing from the Director of Financial Aid with any further instruction if necessary.

If you have any questions please call the Financial Aid 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: _____