UNIVERSITY OF BALTIMORE

Office of Financial Aid

2021–2022 Dependency Appeal Form

The dependency status appeal form can be used if you have an extenuating circumstance that may hinder you from successfully completing your Free Application for Federal Student Aid (FAFSA). The Office of Financial Aid must have documented proof of the extenuating circumstance that prevents a student from obtaining parental data for the FAFSA form. The following documentation listed on this form MUST be provided.

Please note, federal guidelines state that the following situations alone are not considered "extenuating circumstances": 1) Your parents are unwilling and/or unable to financially support you. 2) You live on your own and pay your own bills. 3) Your parents refused to provide information required for completion of the FAFSA or verification.

A. STUDENT INFORMATION

Last Name | *First Name* | *M.I.* | *Student ID Number (begins with 1 or 3)*

Email Address | *Telephone Number* | *Date of Birth*

B. APPEAL CONTENTS

- ◯ A typed and signed explanation of your exceptional circumstance. Your explanation must be clear, concise, and must include a complete history of the following:
  - Your relationship with your biological and/or legally adoptive parents—include their first and last names and when you last spoke with each parent.
  - How long you have been separated from your parents and specific dates that led up to your separation.
  - If you have any siblings, please provide their first and last name. Include where they live and with whom, and describe your relationship with them since the separation from your parents.
  - How you have been supporting yourself—if applicable, include auto/health insurance and who pays for the insurance, including a copy of the card(s)
- ◯ A copy of your birth certificate
- ◯ A signed letter from a professional (on their letterhead) documenting their knowledge of your exceptional circumstance. The letter must include the professional's contact information—a professional includes college or high school counselors, mental health professionals, social workers, mentors, doctors, clergy, etc.
- ◯ Copy of your 2019 tax transcript or use of the IRS Data Retrieval Tool on your FAFSA
- ◯ All 2019 W-2 forms

Please note: Students approved for a dependency override must request a review of their dependency status each year until the student is automatically considered independent by federal criteria.

C. SIGN THIS WORKSHEET

By signing this worksheet, I certify that all the information reported on this worksheet to qualify for federal student aid is complete and correct. **Warning: If you purposely give false or misleading information on this worksheet, you may be fined or sentenced to jail or both.**

Student's signature | *Date*