

ILLINOIS STATE UNIVERSITY
Financial Aid Office
Dependency Status Appeal 2024-2025

If you marked 'Yes' to having an unusual circumstance that prevents you from contacting your parent(s) or by contacting your parent(s) it would pose a risk to you on the Free Application for Federal Student Aid (FAFSA), then US Department of Education regulations permits the Financial Aid Office to exercise *professional judgment* to determine that circumstances exist which permit a student to be considered independent for financial aid purposes.

This determination is made on a case-by-case basis and can be made only when there has been a complete breakdown of the family relationship such that it is impossible for the student to obtain parental financial information. Such circumstances include physical or emotional abuse, severe estrangement, abandonment, parental substance abuse, mental incapacity, or incarceration.

Examples of circumstances that **DO NOT** support a determination that the student is independent include:

- *Unwillingness* on the part of a parent to assist a student financially.
- Not being claimed as a dependent on the parent(s) Tax Return.
- Parent's refusal to provide financial information for the FAFSA.
- A student who is and has been financially self-supporting.
- A student who chooses not to communicate with his or her parent(s).
- A student who previously has been considered independent for financial aid purposes but who does not meet the requirements for award year 2024-2025.
- A student who is divorced at the time of filing the FAFSA and who does not meet any of the other federal criteria for independent status for award year 2024-2025.

INSTRUCTIONS:

This form requires you to provide your personal statement and specific documentation. You should concentrate on providing *facts*, *not opinions*. The following will be used to verify your situation. All information you provide will be kept confidential.

- Complete this Dependency Status Appeal using blue or black ink only. Attach additional sheets of paper if necessary.
- Secure a written statement on letterhead from at least one professional adult who is not a relative. *This statement should verify the family circumstances you describe in #1 on this form.* "Professional adult" includes clergy, court official, guidance counselor, teacher, professor, physician, mental health professional, or law enforcement official. This statement must be on official letterhead *or* notarized.
- Secure written statements from two other individuals that are aware of your family circumstances and that can provide information to support your appeal.
- Attach documentation showing financial resources for calendar year 2024 (*i.e.*, 2023 federal income tax return, W-2 form(s), a pay stub showing cumulative 2024 earnings, or other proof of income).
- FAILURE TO PROVIDE SUPPORTING DOCUMENTATION WILL RESULT IN DENIAL OF YOUR APPEAL.

REVIEW OF APPEAL:

An Appeal Committee in the Financial Aid Office will review Dependency Status Appeals on a case-by-case basis and will exercise professional judgment to determine if circumstances are sufficient to permit the student to be considered independent for financial aid purposes AND if adequate documentation has been provided. You will be notified by email of the committee's decision. If granted a dependency status appeal, please allow up to two to three weeks for your FAFSA and financial aid eligibility to be fully updated.

2025



Dependency Status Appeal 2024-2025

Student Name _____

Student ISU ID Number _____

Please FAX the completed original form and supporting documents to: **(309) 438-3755** or mail to: **Financial Aid Office, Campus Box 2320, Normal, IL 61790-2320**. If you have questions about completing this worksheet, call the Illinois State University Financial Aid Office at (309) 438-2231 or e-mail financialaid@IllinoisState.edu.

1. Explain the circumstances which make it impossible for your parent(s) to provide the financial information necessary to complete the Free Application for Federal Student Aid. Please include information regarding both your mother and father. *Use additional sheets of paper if necessary; attach the written statements from a professional adult and the two other references as indicated on Page 1.

2. Explain how you are meeting your living expenses without parental assistance. *Use additional sheets of paper if necessary; attach the documentation of 2023 income indicated on Page 1.

3. In the table below, provide the requested information about two adults (other than your professional reference) who can be contacted to verify your financial and living situation.

NAME	RELATIONSHIP	ADDRESS	PHONE NUMBER

By physically signing this worksheet, I certify that all the information reported here to qualify for federal student aid is complete and correct. A signature must be completed in black ink or via a stylus on an electronic device.

Student Physical Signature

Date

FOR OFFICE USE ONLY

Staff review: ___ Approved Date: _____ Staff Initials: _____ Add Checklist: FINA/DPAPPL
___ Denied Date: _____ Staff Initials: _____

Reason for denial: _____

Assistant Director: ___ Approved ___ Denied _____ Date _____

Reason for denial: _____