APPEAL FOR INDEPENDENT STATUS

Student Name: ___________________________________________________________
(last) (first) (middle initial)

Last Four Digits of Student SSN: XXX - XX - ________ UW Student ID #: ________________

If you are a dependent student according to the financial aid definition (see below), your aid eligibility is determined by using parent income and asset information in addition to your information. Dependent students are required to provide parental information and signatures to be considered for financial aid. We cannot approve an appeal based solely on a parent's unwillingness or inability to support a student's college education or their unwillingness to provide the required information.

 If you are considered an unaccompanied homeless youth, you may appeal to apply for aid without parental information. For this purpose, a new determination must be made each school year to classify you as an unaccompanied homeless youth.

 If you cannot provide parent information due to unusual family circumstances, you may appeal to apply for aid without parental information. For this purpose, an unusually circumstance includes, but is not limited to, a permanent, irreconcilable break in the relationship with the parent(s) due to abuse, abandonment, or extreme mistreatment.

1. PLEASE READ: WHAT IS A DEPENDENT STUDENT?

For financial aid eligibility, you are considered dependent unless you meet one of the following conditions:

A. You are over 24 years of age. (By December 31 of the award year.)
B. As of your financial aid application filing date, you are married.
C. You are or will be a graduate or professional student during your term of enrollment.
D. You are active duty military for purposes other than training.
E. You are a Veteran.
F. You have children or a legal dependent who will continue to be supported by you during your term of enrollment.
G. When you were 13 or older, both of your parents were deceased, you were in foster care, or you were a ward of the court.
H. You are currently an emancipated minor or in a legal guardianship as determined by the court.
I. As of your financial aid application filing date, you are considered an unaccompanied youth who is homeless by one of the following: your high school or school district homeless liaison, the director of an emergency shelter program funded by HUD, the director of a runaway or homeless youth basic center or transitional living program.

2. REASON FOR APPEALING FOR INDEPENDENT STATUS

Indicate the academic year you are appealing: ________________________

 Choose the reason you are appealing for Independent Status:

□ UNACCOMPANIED HOMELESS YOUTH: I am an unaccompanied homeless youth or I am self-supporting and at risk of homelessness who does not fit condition “I” as described in the Financial Aid Definition above.

□ UNUSUAL CIRCUMSTANCES: I have unusual family circumstances.
3. UNACCOMPANIED HOMELESS YOUTH

Please complete the information below addressing your unaccompanied homeless youth status.

1. Do you live with a parent or guardian?  □ Yes  □ No

2. If you are not living with a parent or guardian, indicate your living situation (choose one):
   - □ Hotel or Motel
   - □ Shelter or other temporary housing program
   - □ Couch Surfing
   - □ Car, park, campsite, or sleeping on the street
   - □ In a residence with inadequate facilities (no heat, water or electricity)
   - □ Transitional Housing
   - □ Doubled up with another family due to hardship
   - □ Staying in on-campus housing or otherwise would be homeless
   - □ Other, please indicate: _____________________________________________________

3. Are you able to provide documentation to verify your status as an unaccompanied homeless youth?
   - □ Yes. Attach documentation from an authorized official (a social worker, case manager, church official, mentor, doctor, mental health professional, college administrator, homeless shelter and service provider) verifying your status as an unaccompanied homeless youth.
   - □ No. Explain your situation qualifying you as an unaccompanied homeless youth and explain why you are unable to get documentation from an authorized official.

4. UNUSUAL CIRCUMSTANCES

Please address the first two items listed below in your explanation and attach the required supporting documentation of your family’s unusual circumstances.

1. Explain why you cannot obtain parent information.

2. List the location of both your parents, the last time you received financial support and the last time you had contact with each of them: when, where, and the nature of the contact.

3. Attach at least two pieces of documentation or statements from responsible adults who are aware of your situation and can corroborate the facts you present. Examples of such persons would include clergy, social workers or other social service personnel, court officials (or copies of court documents), teachers or high school counselors and police officers. Their statements must be signed and their contact information must be listed should we need to contact them.

5. EXPLANATION OF CIRCUMSTANCES

Please write clearly and attach additional sheets if necessary or attach a signed statement. Make sure you address the required information (refer to the instructions listed in section 3 for Unaccompanied Homeless Youth and in section 4 for Unusual Circumstances).

_________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________
_________________________________________________________________________________________________________________________
6. CERTIFICATION AND SIGNATURE

I certify the information provided on this form and its attachments are true and complete to the best of my knowledge. I understand that a financial aid counselor may reach out to me for additional information.

Student Signature: ___________________________________________  Date: __________________________

7. HOW TO SUBMIT YOUR FORMS

You may submit form(s) by mail, fax or drop off in person to your campus financial aid office. To send this form electronically, scan and upload it via DocuSign: https://apps.concert.uw.edu/sign/finaid/DOC%20UPLOAD%20S

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<th>UW Bothell Campus: Office of Financial Aid &amp; Scholarships</th>
<th>UW Seattle Campus: Office of Student Financial Aid</th>
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<tr>
<td>Husky Hall 1130, Box 358500</td>
<td>105 Schmitz, Box 355880</td>
<td>MAT 213, Box 358400</td>
</tr>
<tr>
<td>18115 Campus Way NE Bothell, WA 98011-8246</td>
<td>1410 NE Campus Parkway</td>
<td>1900 Commerce Street Tahoma, WA 98402-3100</td>
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<tr>
<td><a href="mailto:uwbfaid@uw.edu">uwbfaid@uw.edu</a></td>
<td>Seattle, WA 98195-5880</td>
<td><a href="mailto:uwtfa@uw.edu">uwtfa@uw.edu</a></td>
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<tr>
<td>425.352.5240</td>
<td><a href="mailto:osfa@uw.edu">osfa@uw.edu</a></td>
<td>253.692.4374</td>
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<tr>
<td>425.352.3217 Fax</td>
<td>206.543.6101</td>
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<tr>
<td>uwb.edu/financialaid</td>
<td>206.685.1338 Fax</td>
<td>tacoma.uw.edu/finaid</td>
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OFFICE USE ONLY: ➞ Check SFT10XX Step 3 for ‘Y’ ➞ Update SFT140 OVERRIDE FAF DEP (I OR D): I ➞ Update CPS (Dependency Override: Dependent to Independent or Homeless Youth Determination) ➞ Edit doc type if UHY to INDEP-HOMEELS ➞ Notate file

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