



Revised: 1/9/20

Office of Student Financial Aid & Scholarships

Appeal for Independent Status

OFFICE USE ONLY

Student Name: _____ **NSHE ID:** _____

Students appealing for independent status must clearly demonstrate how their circumstances would allow for an override of the federal definition of a dependent student. Approvals are only granted for students who are unable to obtain parental information for the FAFSA because it is unsafe to contact parents or impossible to do so. **Refusal by parent(s) to provide data or financial assistance does not justify an appeal for independent status.**

SECTION 1: REQUIRED DOCUMENTATION

All required documents listed below must be attached to this appeal. Incomplete appeals will not be considered.

Provide your name and student NSHE number on every document submitted.

1. Personal Statement: Submit a signed statement that clearly outlines 1) the extenuating circumstances you believe make you independent, and 2) specifically describe how you supported yourself during the last calendar year. If a previous appeal has been approved, an updated student statement is required.

2. Third-Party Statements: Submit a minimum of two signed, detailed third-party statements supporting the claims made in your personal statement. Recommended third parties may include school counselors, administrators, clergy, physicians, social workers, or other individuals who are familiar with your circumstances. *The statements must be signed and submitted on business letterhead, and must include phone number and address.* If a previous appeal has been approved, third-party statements are not required.

3. Financial Verification Documents: Submit the V-1 Independent Verification Worksheet and all accompanying documentation, as requested on the worksheet, for the current academic year.

SECTION 2: STUDENT INFORMATION

1. What are your current living arrangements? Campus Housing Off-Campus With friends/relatives Other

If living with friends or relatives, identify who: _____

If "Other," explain: _____

2. Were you claimed by anyone on their federal income tax returns for the prior two calendar years? Yes No

If yes, identify person, relationship, and year: _____

3. What is your parents' current address and phone number?

Address: _____ Phone Number: _____

SECTION 3: CERTIFICATION

I hereby certify that all information reported on this form and any attachments hereto are true, complete, and accurate. False statements or misrepresentations will be cause for denial, reduction, withdrawal, and/or repayment of financial aid.

Student Signature: _____ **Date:** _____

OFFICE USE ONLY

Previously approved

Meeting Date: _____ **Committee:** _____
Notes: _____ Appr Deny Pend PCE COM DB

Meeting Date: _____ **Committee:** _____
Notes: _____ Appr Deny Pend PCE COM DB

Meeting Date: _____ **Committee:** _____
Notes: _____ Appr Deny Pend PCE COM DB

CONTACT US

Phone: 775-784-4666 Fax: 775-784-1025 E-mail: finaid@unr.edu Location: 3rd Floor, Fitzgerald Student Services Bldg.