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Request to Re-evaluate Dependency Status

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Printed Na	Same: S	tudent ID Number:
	ed States Congress has developed a definition for Independent of Education, an independent students.	
 Is a Is a Wi Is a	ent: at least 24 years of age a veteran of the U.S. Armed Service married Vill be working on a master's or doctorate program a ward/dependent of the court until age 18 or both p as one or more dependents that get more than half of	
provide the to assist a parents. The contact with notarized,	not meet one of the above criteria, you will be evaluated income and asset data of your parents. In extreme a student who is dependent by definition, but who do this applies to such situations where the student's phorith the parents/guardians. In such cases, the student is, documentation from a third party provider. Additional by the situation.	cases, the Office of Financial Aid may be able es not or cannot have contact with his/her ysical or emotional welfare is jeopardized by must complete this form and provide written,
	UST PROVIDE ALL INFORMATION LISTED I ATED BY THE FINANCIAL AID OFFICE FOR	
1.	What are your present living arrangements? How l	ong has this arrangement taken place?
2.	How do you support yourself and meet your living	g expenses?
3.	When was the last time you lived with your parent	s?
4.	When was the last time you had contact with your	parents?

5. When did your parents last provide any form of support?

	6.	Please explain any unusual circumstances which clearly indicate that you should not be evaluated as a financial dependent of your parents or guardian. NOTE: Parents' unwillingness to pay for college is not sufficient. Also, not living with your parents is not sufficient cause for independent status. You must prove unusual circumstances such as abandonment or abusive situation.	
Suppor	tin	g Documentation Must Be Attached	
?	7. You must provide a signed and notarized statement from a third party service provider (past counselor, social service, probation officer, etc.) that clearly documents the unusual circumstances listed above. If the statement is on professional letterhead, it doesn't have to notarized. The statements must include contact information (address & phone number) so the Financial Aid Office can follow up on the statement.		
		I certify under penalty of perjury that the above information is true and correct.	
		Signature of Student Date	
		PLEASE RETURN THIS FORM AND ALL SUPPORTING DOCUMENTATION TO THE ICC FINANCIAL AID OFFICE. Please allow 2-3 weeks for processing to be completed. (Attach additional information as needed)	
Fin	and	cial Aid Office Use Only	
Арі	pro	ved Disapproved	
Con	mn	nents:	