



2019-20 Petition to Apply for Financial Aid as an Independent Applicant

The UM Student Aid Office encourages that PII (personally identifiable information) is not sent via email (insertion or attachment). If PII is encrypted using a password-protected WinZip archive, it may be sent via a separate email message.

Name: _____

Student ID: _____

Address: _____

City _____ State _____ Zip _____ Phone: _____

Award year or time frame for which you are petitioning: _____

You are considered an independent student if the student can answer "YES" to one of the following questions:

- Were you born before January 1, 1996?
- As of today, are you married? (Answer "YES" if you are separated, but not divorced.)
- At the beginning of the 2019-20 school year, will you be working on a master's or doctorate program?
- Are you currently serving on active duty in the U.S. Armed Forces for purposes other than training?
- Are you a veteran of the U.S. Armed Forces?
- Do you have children who will receive more than half of their support from you between July 1, 2019 and June 30, 2020?
- Do you have dependents (other than children or spouse) who live with you and who receive more than half of their support from you now through June 30, 2020?
- At any time since you turned age 13, were your parents deceased, were you in foster care or were you a dependent or ward of the court?
- Are you or were you an emancipated minor as determined by a court in your state of legal residence?
- Are you or were you in legal guardianship as determined by a court in your state of legal residence?
- At any time on or after July 1, 2018, did your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless, or were self-supporting and at risk of being homeless?
- At any time on or after July 1, 2018 did the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless, or were self-supporting and at risk of being homeless?
- At any time on or after July 1, 2018, did the director of a runaway or homeless youth basic center or transitional living program determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless?

If you cannot answer "YES" to one of the above questions, you will be evaluated as a dependent student and you must provide the income and asset data of you and your parents.

Financial aid regulations assume that the family has primary responsibility for meeting the educational cost of students. If you are considered a dependent student according to the financial aid definition, your aid eligibility is determined by using parent income and asset information in addition to your information. Dependent students are required by law to provide parental information and signatures to be considered for financial aid.

According to Federal law none of the conditions listed below, singly or in combination, qualify as unusual circumstances or merit a dependency override:

- Parents refuse to contribute to the student's education.
- Parents are unwilling to provide information on the application or for verification.
- Parents do not claim the student as dependent for income tax purposes.
- Student demonstrates total self-sufficiency.

Unusual circumstances do include an abusive family environment or abandonment by parents and may cause any of the above conditions. If you can document why you should be considered independent for some unusual reason, you may petition for a waiver of federal regulations requiring parental information.

- **FIRST, PROVIDE A SIGNED LETTER EXPLAINING IN DETAIL WHY YOU SHOULD BE CONSIDERED AS AN INDEPENDENT STUDENT.**

Next you should answer each of the following items.

- Did you file Federal Income tax return:
 - For 2017 ____ Yes ____ No (if yes, please provide the Financial Aid office a signed copy)
 - For 2018 ____ Yes ____ No (if yes, please provide the Financial Aid office a signed copy)
- Did your parents claim you as a dependent for Federal income tax purposes for the:
 - Tax Year 2017 ____ Yes ____ No
 - Tax Year 2018 ____ Yes ____ No
 - Will your parents claim you as a dependent for the:
Tax Year 2019 ____ Yes ____ No
- Identify the location of both of your parents

Parent 1 _____

Parent 2 _____

- Describe the last time you had contact with your parent(s), when, where and the nature of the contact.

- Describe how you have been self-supporting. When did you start meeting your expenses without parental support and how have you provided for yourself?

- Give the dates and addresses of where you resided during the past two years and attach a copy of your current lease if applicable.

- Provide three signed letters and/or court documents or other documentation, from responsible adults who are personally aware of your situation. At least two statements should be from pastors and/or public elected officials, school counselors, teachers, administrators, or attorneys, judges or you may provide other documentation. Letters should include the name, job title, address, phone number, signature, and relationship to you, if any, of the person(s) submitting the letter.

Certify below: I attached statements from the following persons

(Give names, address, job title and relationship to you)

1. _____

2. _____

3.

- List the month and year you last received financial support from your parent(s)
 - Month _____ Year _____
- If you are covered under a medical plan, list the following information:
 - If not covered, list "not covered" here _____
 - Name of insurance company _____
 - Name of person/company providing coverage _____
 - Amount of person's insurance premiums _____
- List your current home address and phone number:
 - Address _____
 - City _____ State _____ Zip _____
 - Phone Number _____
- List the number of months in the 2019-2020 school year that you will live at this address _____
- List the name(s) of anyone who will share housing expenses with you in the 2019-2020 school year: _____

- List the name of the registered owner of your automobile _____
- If you are the registered owner, provide the following:
 - Year, make and model _____
 - Purchase date _____
 - Total balance owed _____
 - Monthly auto payment _____
 - Name/Relationship of person paying auto payment _____

Sign this Certification Statement

All of the information on this request to reevaluate dependency status is true and complete to the best of my knowledge. I understand that if I give false or misleading information on this request, I may be subject to a \$50,000 fine, a prison sentence, or both.

Student Signature

Today's Date

FOR OFFICE USE ONLY:

Admission Applications Reviewed

Approved

Denied

Comments:

