



Student Financial Aid Office
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FAX: 301-791-9165

Available 24/7

Go to www.hagerstowncc.edu:
Proceed to paying for college,
click on the icon for FA TV.

Student Financial Aid Dependency Appeal QUESTIONNAIRE

Student Name: _____

Student ID #: _____

FAFSA regulations never require parents to help pay for education, but they often insist on considering their financial resources when evaluating your financial need. If you were most recently supported by legal guardians, relatives, or friends, you **cannot** list their data on your FAFSA.

CIRCLE YOUR RESPONSE TO THE QUESTIONS BELOW:

- | | | |
|-----|----|---|
| yes | no | Were you born before Jan. 1, 1988? |
| yes | no | Are you married? (Answer "Yes" if you are separated but not divorced.) |
| yes | no | Are you currently serving on active duty in the U.S. armed forces for purposes other than training? |
| yes | no | Are you a veteran of the U.S. armed forces? |
| yes | no | Do you have children who receive over half of their support from you? |
| yes | no | Do you have dependents who receive over half of their support from you? |
| yes | no | Are your parents deceased? |
| yes | no | At any time after turning 13 years old, were you a ward or dependent of the court? |
| yes | no | At any time after turning 13 years old, were you in foster care? |
| yes | no | Are you an emancipated minor? (requires legal court documents) |
| yes | no | Are you in legal guardianship other than your parents? |

If you answered yes to any of the above questions you may be required to submit legal documents to verify your answer. You do not need to complete this form. You are independent for financial aid purposes and will not need to include parent's information when completing the FAFSA.

If you answered no to all of the above questions and one of the following applies to you then you may want to complete this form.

- A guardian has cared for you because your parents were unable to provide proper care, but your guardian was never declared a "legal guardian" by the court.
- Your parents were physically or emotionally abusive toward you or your siblings.
- Your parents have substance abuse or other serious mental health problems **AND** do not support you or your siblings.

HCC's Student Financial Aid Office cannot make students independent simply because their parents can't afford to help. The standard financial need formula already evaluates each family's financial resources and determines the family's ability to contribute toward the student's educational expenses. If the financial resources are low enough, the student will show high financial need. We also can't make students independent simply because their parents stop claiming them as tax exemptions or choose not to help pay for college.

CIRCLE YOUR RESPONSE TO THE QUESTIONS BELOW:

- yes no In the last twelve months did your parents pay your rent?
yes no In the last twelve months did your parents pay your car insurance?
yes no In the last twelve months did your parents provide health insurance for you?
yes no In the last twelve months have your parents purchased your groceries?
yes no In the last twelve months have your parents paid your utility bills?
yes no Do you feel you pay **all** of you living expenses?
yes no Did either of your parents claim you on their taxes?
- yes no Did your parents refuse to complete the FAFSA?
yes no If yes, your parents refused to the FAFSA. Will your parents sign the statement below:

I refuse to complete the income information on my child's Free Application for Federal Student Aid (FAFSA). I understand that by refusing to supply this information, I am limiting his/her eligibility for Federal Student Aid to student loan funds. He / She will be **ineligible for all free grant assistance:** Federal Pell Grants, SEOG: Supplemental Education Opportunity Grants, State Grants, etc.

Parent's Signature _____ Date _____

If your parent refuses to sign this statement, if possible provide supporting documentation verifying their refusal to complete the FAFSA. (example: copy of an e-mail, etc.)

You must also attach:

1. Your 2010 Federal Tax return, W2 earnings statement and verification of 2010 untaxed income
2. Your parents' 2010 Federal Tax return, W2 earnings statement and verification of 2010 untaxed income
3. Typed statement explaining why you no longer live with your parents
4. Unrelated (not a relative) third party statement of verification.

Who qualifies as an unrelated third party? Who can write the statement of verification?

- A high school or local school district homeless liaison,
- A high school principal, guidance counselor, teacher, coach, school nurse, etc.,
- A medical professional, psychologist, psychiatrist, nurse, etc.,
- A therapist, social services case worker, pastor, etc.,
- The director of an emergency shelter program funded by the U.S. Department of Housing or Urban Development or
- The director of a runaway or homeless youth center or transitional living program.

What should this person write? What should be included in a "statement of verification"?

- That depends on your special circumstances. This person is basically verifying that you do not live with your parents and you do not receive support from your parents.
- They are also explaining why you no longer live with your parents. They are documenting:
 - You were abused by your parents,
 - That your parents are alcoholics or use drugs and do not support you,
 - Your parents abandoned you and you do not know where they live or
 - The severe circumstances that caused you to no longer live with your parents.

By signing this appeal form, I certify that all the information provided is complete and correct. I understand that if I purposely give false or misleading information I may be fined, be sentenced to jail, or both.

Student Signature: _____ Date: _____