

2015-2016 Request For Independent Status

351 W. University Blvd • Cedar City, UT 84720 • (435) 586-7735 • (435) 586-7736 • http://www.suu.edu/financialaid

Pleas	se print clea	rly																		
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T Nu	mber							Phon	ne Nu	mber					1					
Stude	ent's Name									Email Address										
You r	nay use this fo	orm to red	nuest a i	review	of exten	uatin	g circu	umstai	nces re	egardin	ng vou	r inder	oender	nt stati	us.					
1001	The follow		_				-			-	-6 J o u		, , , , , ,	10 5000						
	1) Parents refuse to contribute to the student's education																			
	2) Parents are unwilling to provide information on the FAFSA or for verification3) Parents do not claim the student as a dependent for income tax purposes																			
	4) Student						ent for	r incoi	ne tax	purpo	ses									
STE	P 1: Please se Independ													l or N	ew Ro	equest	t for			
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	If you were granted a dependency override by SUU in the 2014-15 year, you need to reaffirm that the unusual circumstances persist and that an override is still justified. Please submit the following document (s) to the SUU Financial													ancial						
	Aid & Scholarships Office.												inciai							
	Α	A. Updated letter detailing the special circumstance that makes you independent from your parents.																		
	B. Updated letter from a professional (teacher, counselor, clergy, social worker) familiar with the situation, and that can reaffirm that the unusual circumstances still persist.												nd							
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		Your 20				erride	e must	t be ve	erified	by the	SUU	Financ	cial Ai	id Off	ice be	fore th	ne 201	5-201	6	
_	Depende	ency Ove	rride w	ill be gi	ranted.															
	NEW RE	QUEST 1	FOR IN	NDEPE	ENDEN'	T ST	ATUS	S:												
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		. Letter																		
	B. Two statements from professionals (teacher, counselor, clergy, social worker) familiar with the situation, furth outlining and verifying the special circumstances. The statements must include address and telephone number																			
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STEP	2: VERIFIC				C	201	4 6 1													
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STEP	3: CERTIF					_					-	-	our ac	know	ledge	ment d	of the	follov	ving:	
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	>	There is	s approxi	mately a	four week	proces	ssing tin	ne for tl	he requ	est.										
Stude	nt Signature:_											Dat	te:							

RRAAREQ Code: DEPOVR