REQUEST TO RELINQUISH PARENTAL RESPONSIBILITY IN FILING 2008-2009 FINANCIAL AID APPLICATIONS

To be eligible for federal financial aid students must meet certain requirements to qualify for financial aid as independent. If you do not meet one of the requirements listed under step three of the Free Application for Federal Student Aid (FAFSA), you will be evaluated as a dependent student. Only extreme situations can be considered for exceptions, please read below if this applies to you.

EXTENUATING CIRCUMSTANCES

If you feel that your circumstances demonstrate that your parents have relinquished their parental responsibility and control, please answer all of the following questions and provide all of the requested documentation. Examples of situations that may warrant a dependency override include:

- Documented physical or emotional abuse.
- Severe estrangement or Abandonment.
- Documented Parental Drug or Alcohol Abuse.
- Mental Incapacity.
- Situations beyond the student’s control that prevents a parent-child relationship.
- Certain Guardianship agreements.
- Have dependents who receive more than 50% of support from you

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

- Parent’s refusal to contribute to the student’s education.
- Parent’s unwillingness to provide information on financial aid applications for verification.
- Parents do not claim the student as a dependent for tax purposes.
- Student demonstrates total self-sufficiency (where a student chooses to live does not determine dependency).
- Emancipation papers submitted to a high school.

Based on the documentation you submit, the Appeals Committee will make a decision regarding your dependency status. The decision of the Appeals Committee is final. You must submit this appeal form and all supporting documentation together as your appeal will only be reviewed one time. The burden of proving your eligibility for independent status rests upon you. In light of this, please use the instructions on the back of this correspondence to make sure that your appeal is complete before you submit it to our office.

TIMELINE: It is important that completed REQUEST TO RELINQUISH PARENTAL RESPONSIBILITY is submitted at least one month prior to your tuition due date to allow proper processing time through the Federal Central Processor and Niagara County Community College. Students completing a request after this time period will be expected to pay their tuition and fees or use the College’s Payment Plan to cover any existing account balances.

Return this form to the Financial Aid Office, Room A-114, in the Ernest Notar Administration Building, along with a completed 2008-2009 FAFSA. If you have already filed a FAFSA, return this form with a copy of the Student Aid Report sent to you as acknowledgement of your federal application. Appeals cannot be taken over the telephone.
Please Note:  
If filing Independent because of having a child, please disregard Steps 1 and 2 below. Proceed to Step 3 instead and include:

- Copy of child’s birth certificate, a utility bill or rental agreement, and a notarized letter stating no one else will claim your child for the 2007 tax year.

PLEASE COMPLETE THE FOLLOWING:

1. A letter stating your extenuating circumstances or your reasons why you believe you should be considered an independent student for the purposes of receiving Federal financial assistance. At minimum, discuss such issues as your emancipation from your parents, your residency, your self-sufficiency, and your financial resources for 2007, 2008, and projected 2009. Emancipation papers submitted to a high school are not acceptable documentation by themselves. Your letter should indicate why you cannot return to your parent’s home and why you feel the parent-child relationship no longer exists between you and your parents.

2. A letter from at least two persons other than your relatives (such as a member of the clergy, a social worker, a legal aid representative, school counselor, or an official at the facility that has accepted responsibility for your care) relating to your family circumstances. This statement must include the specific reasons for relinquishment of parental responsibility and control. The person making the statement should include his/her relationship to you and how that person has direct knowledge of your family circumstances.

3. Provide documentation of all income and benefits received by you or for you in 2007. Documentation includes signed copies of your 2007 Federal Tax return and W-2 form(s), and/or verification of your receipt of untaxed income such as public assistance benefits, social security benefits, unemployment compensation, etc.

4. Please provide your parents’ current address(es) – include street, city, state, phone number(s):

   Mother:__________________________________________________________
   Father:__________________________________________________________

5. Have you applied for independent student status at any other institution of higher education (college, university, business school, etc.) in this year or prior? ____NO   ____YES   If yes:

   Where:____________________________________________________________________________________
   Where:____________________________________________________________________________________

6. Where did/will you live in:

   2007 ___With Parents   ___With Relatives   ___On Your Own
   2008 ___With Parents   ___With Relatives   ___On Your Own
   2009 ___With Parents   ___With Relatives   ___On Your Own

   If “On Your Own” is checked, please provide copies of rent/lease agreement or mortgage statement.

CERTIFICATION: All of the information on this form and attached documentation is true and complete to the best of my knowledge. If asked by an authorized official, I agree to give proof of the information that I have given on this form. I realize that this proof may include a copy of any sources listed on this document or any sources listed on other documentation received by the College.

________________________________________________  ______________________________
Student’s Signature       Date

2008-2009 FAFSA:  [ ] Attached to this form  [ ] I have already filed

Submission of this form does not mean that you will automatically be granted independent status. The decision of the Appeals Committee is final. You will be notified within two weeks of the receipt of request.

Office Use Only:
This request was reviewed by ____________________________ on ________________.
The determination was made to approve/disapprove the request.