

Provisional Independent Status Verification

Student's Name: _____

Student ID: _____

Your Free Application for Federal Student Aid (FAFSA) was selected for a process called verification. You reported on your FAFSA that there may be unusual circumstances that require consideration for independent status and the omission of parent information on your FAFSA. Generally, a student is considered dependent on their parents for financial aid purposes until they are 24 years old, married, or have their own children. FLCC understands that under certain circumstances, students who do not meet the federal financial aid definition for independence should be considered independent due to their unusual circumstances.

Allowable reasons include, but are not limited to:

- You or your parent are incarcerated
- You have left home due to an abusive or threatening environment
- You have been abandoned by or estranged from your parents and have not been adopted
- You were granted refugee or asylee status and are separated from your parents, or your parents are displaced in a foreign country
- You are a victim of human trafficking
- You are unable to contact or locate your parents and have not been adopted

Circumstances that **DO NOT** warrant independent status:

- Student does not live with parent and is self-supporting
- Parent(s) refuse to contribute to the student's education
- Parent(s) unwilling to provide information on the FAFSA
- Parent(s) do not claim the student as a dependent on their income tax return

1) Please describe the unusual circumstance that you believe makes you independent from your parent(s).

Where do your biological mother and father currently live? _____

Do you live with your biological mother or father? Yes No

Do you receive any financial support from your biological mother or father? Yes No

When did you last have contact with your biological mother or father? Date: _____

How frequently have you had contact with your biological mother or father over the past two (2) years? _____

2) Provide a separate letter from an independent 3rd party professional (ex. counselor, social worker, high school guidance counselor, medical personnel, clergy, court official, attorney, police, government agency) who can attest first-hand to your circumstances. This letter must include as much detail about the situation as possible, including dates. The letter should preferably be written by someone who is not related to the student and not residing in the same household. The letter must include their name, relationship to the student, and their contact information. **PLEASE UPLOAD THIS FORM AND ACCOMPANYING DOCUMENTATION TO MYFLCC.**

OR

3) Provide copies of legal documents that support your situation (police reports, case notes from CPS, court orders). **PLEASE UPLOAD THIS FORM AND ACCOMPANYING DOCUMENTATION TO MYFLCC.**

CERTIFICATION

By signing below, I acknowledge and confirm that the above information is complete and correct. Purposely giving false or misleading information may result in federal fines, jail sentence, or both.

Student Signature

Date

Finger Lakes Community College

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