



# FINANCIAL AID & SCHOLARSHIPS OFFICE

## Unusual Circumstances Form

**\*\*Use the *Secure Document Uploader* in Pathway to submit your forms quickly and securely!\*\***  
Use Document Type: [Dependency Appeal](#)

The U.S. Congress and Department of Education determine the criteria for whether a student is considered dependent or independent of their parents for financial aid purposes.

If you feel there are extenuating circumstances which might warrant re-evaluation of your dependency status, provide the following information so that your financial aid administrator may make this determination. You may be asked for additional documentation depending on your individual situation.

This office **will not** change a student's dependency status for the reasons listed below:

- The parents are unwilling to provide the financial data required on the Free Application for Federal Student Aid
- The student provides all of his or her financial support and/or no longer lives with parents

### STUDENT INFORMATION

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Email: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Current Address: \_\_\_\_\_

Please provide a written explanation of the situation and be prepared to provide documentation to support any claims. In your written statement, you should address each of the following items:

1. Identify the location of both your parents;
2. Describe the last time you had contact with each of your parents – when, where, and the nature of the contact;
3. Explain why you cannot obtain parental information.

Once your written statement is received, a financial aid coordinator will contact you with a request for additional documentation. Again, be prepared to provide supporting documentation attesting to your situation and contact the UMKC Financial Aid and Scholarship Office with any questions.

### CERTIFICATION STATEMENT

***All the information provided for this appeal is true and complete to the best of my knowledge. If asked by an authorized official, I agree to provide additional documentation supporting the information that I have provided on this form. I realize that if I do not provide all additional documentation requested, this appeal will not be considered.***

**Important!** Typed signatures are not valid for the purpose of submitting this form. Signatures must be handwritten.

\_\_\_\_\_  
Student

\_\_\_\_\_  
Date

**WARNING:** *If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.*