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UCSC Student's ID /Account
Number (Do not use CRUZ ID)

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UCSC Student's Last Name

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First Name

2019-20 Independent Appeal Certification

Students classified as dependent may petition to be reclassified as independent for purposes of determining financial aid eligibility. This form contains three separate sections—Section 1 for students reaffirming the unique circumstances they documented in a prior year with our office, Section 2 for students appealing for independent status based on unique circumstances for the first time with our office, and Section 3 for students whose parent(s) refuse to support their education but who still maintain a relationship. Review each section listed below and complete the one which best describes your student status at UC Santa Cruz.

SECTION 1: REAFFIRMATION OF DEPENDENCY OVERRIDE CIRCUMSTANCES

If you were approved for a dependency override in the 2018–19 academic year, complete this section only and sign and date this form. The override was based on information you submitted regarding your family circumstances. Also, if you have not already done so, complete your 2019-20 FAFSA (Dream App if applicable).

Check the box below which verifies your situation, **sign the Student Certification section**, and return this form to the UC Santa Cruz Financial Aid and Scholarship Office after you file your 2019–20 financial aid application.

- ☐ I declare my family circumstances have improved since last completing the financial aid application. Because of this improvement, I am no longer eligible for the dependency override and must provide parental information on the 2019–20 financial aid application.
- ☐ I declare my family circumstances remain as originally reported and verified when I requested a Dependency override for financial aid purposes. There has been no reconciliation with my parents. I receive no financial support from my parents and do understand that any assistance received from them must be reported immediately and may result in the revocation of the dependency override.

SECTION 2: INITIAL DEPENDENCY RECLASSIFICATION

Complete this section if you are appealing for independent status for the first time in your undergraduate career with our office.

A. The circumstances that will be considered for purposes of reclassification to independent status include those for which you are able to document that all financial and emotional contact with your parents has been severed as the result of an adverse home situation such as:

- Abnormal estrangement from parents
- An unsafe home environment
- Physical or emotional abuse
- Abandonment

- ☐ Check this box if the situation above applies to you and complete the following steps:
1. Write a letter which explains your situation
 2. Provide letters from two professional third parties who know of your situation (e.g. a member of the clergy, a counselor, and a psychotherapist, etc.). These persons cannot be family members or have a personal relationship with you.

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UCSC Student's Last Name

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First Name

SECTION 3: CERTIFICATE OF PARENTAL NON-SUPPORT

A. The situations that will not be considered for purposes of reclassification to independent status include a parent's refusal to contribute to a student's education, an unwillingness to provide information on the FAFSA, not claiming the student as a dependent on a tax return, or a student's demonstration of self-sufficiency. If your parent will not complete a financial aid application and you submit this form with your parent signature in the certification below, your eligibility to receive aid is limited. Typically students in this situation receive unsubsidized student loan for a maximum of \$7,500.

- ☐ Check this box if the statement on this section applies to you. Have your parents sign the Certification of Parental Non-Support below and submit this form with **your signature in the Student Certification Section**. (As an alternative to the parent certification on this form, you may attach a dated letter from your parent(s) in which it is stated the parent(s) refuses to complete the FAFSA (or Dream App if applicable)).

CERTIFICATE OF PARENTAL NON-SUPPORT

I refuse to complete the 2019–20 financial aid application and refuse to financially support the above-named student's education.

Date support stopped ____/____/____

Parent name (please print clearly) _____

Parent Signature _____

Date ____/____/____

Your parent certification of non-support will result in the student receiving limited financial aid.

STUDENT CERTIFICATION

- I hereby declare that all information reported on this document is true, complete, and accurate to the best of my knowledge.
- I understand that any false statement or misrepresentation will be cause for denial, reduction, cancellation and/or repayment of financial aid.

Daytime Phone (____) _____

Email address _____

Student Signature _____

Date ____/____/____