



2017-2018
**DEPENDENCY STATUS
 CHANGE REQUEST**

Office of Financial Aid

Student name: _____ SCC ID #: _____

Part 1 of 4: Student Questionnaire

Section 480(d) of the Higher Education Act (HEA) of 1965, as amended defines an INDEPENDENT student as someone whose circumstances fit into a specific category. If you can answer **YES** to **any one** of the questions below, you are considered an INDEPENDENT student for financial aid purposes, and parental information is **not required** on the 2017-2018 Free Application for Federal Student Aid (FAFSA).

1. Were you born before January 1, 1994?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
2. As of today, are you married? (Also answer "yes" if separated but not divorced)	Yes <input type="checkbox"/>	No <input type="checkbox"/>
3. At the beginning of the 2017-2018 academic year, will you be working on a Masters or Doctorate program (such as MA, MBA, JD, PhD, EdD, graduate certificate, etc.)?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
4. Are you currently serving active duty in the U.S. Armed Forces for purposes other than training?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
5. Are you a veteran of the U.S. Armed Forces?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
6. Do you have children who will receive more than 50% support from you between July 1, 2017 and June 30, 2018?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
7. Do you have dependents other than your spouse or child who live with you and will receive more than 50% support from you between July 1, 2017 and June 30, 2018?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
8. At any time since you turned age 13, were both your parents deceased, were you in foster care, or were you a dependent or ward of the court?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
9. Are you or were you an emancipated minor as determined by a court in your state of legal residence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
10. Are you or were you in a legal guardianship, by someone other than your parent or stepparent, as determined by a court in your state of legal residence?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
11. At any time on or after July 1, 2016, did your high school or school district homeless liaison determine that you were an unaccompanied youth and homeless?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
12. At any time on or after July 1, 2016, did the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth and homeless?	Yes <input type="checkbox"/>	No <input type="checkbox"/>
13. At any time on or after July 1, 2016, did the director of a runaway or homeless youth basic center or transitional living program determine that you were an unaccompanied youth and homeless, or were self-supporting and at risk of being homeless?	Yes <input type="checkbox"/>	No <input type="checkbox"/>

If you answer **NO** to all of the above questions, then you and your parent(s) share responsibility for your higher educational expenses because you are considered a DEPENDENT student. Your parent(s)' financial information must be provided on the 2017-2018 FAFSA.

If you have a **special circumstance** that prevents you from providing parental information, you may be able to submit your FAFSA; however, it will be considered conditional and incomplete. You **MUST** provide documentation to verify your situation and attach it to this completed form.

Part 2 of 4: Student Dependency Certification

To be completed by the student:

Student name: _____ SCC ID#: _____

Address: _____ Phone #: _____

Father/Parent 1's name: _____ Phone #: _____

Father/Parent 1's current address: _____

Mother/Parent 2's name: _____ Phone #: _____

Mother/Parent 2's current address: _____

When was the last time you lived with your parent(s)?: _____
Month/Year

When did your parent(s) last provide any form of support?: _____
Month/Year

When was the last year your parent(s) claimed you as a dependent on their income tax return?: _____
Year

Student Income Information

List your total income (taxable and non-taxable) for the following year:

2015 Sources of Income	2015 Total Amount
Financial Aid	\$
Income earned from work	\$
Other: _____	\$
Total	\$

Please briefly explain how you have been supporting yourself and your current living situation:

Student Signature

Date

Part 4 of 4: Third Party Verification

Student name: _____ SCC ID#: _____

STUDENT: Please forward this section to a **THIRD PARTY PROFESSIONAL** who has knowledge of you, your parent(s) and your special circumstances. A professional includes, but is not limited to: a high school counselor/teacher/official, physician, psychiatrist, clergyman, priest, social worker, etc. NOTE: **Friends or family members are NOT considered third party professionals**, and MAY NOT submit on your behalf **unless requested by the SCC Financial Aid Office**.

THIRD PARTY PROFESSIONAL: The above-named student has applied for financial aid at Solano Community College. The student has indicated on the 2017-2018 FAFSA submitted that **he/she is unable to provide parental information due to special circumstances** regarding his or her family and living situation.

Please provide a **written, typed statement** describing your knowledge of the student's family history and relationship with his or her parents. Include the following information on a separate page (official/business letterhead is preferred).

1. How long have you known the student?
2. What is your relationship to the student?
3. Why do you believe the student is unable to provide parental information on the FAFSA?
4. What is the most recent date, to the best of your knowledge, the student lived with or received support from his or her parent(s)?
5. Why do you believe the student should be considered **independent**?
6. Provide your **full name and current contact information**.
7. **Sign and date your statement.**

All information provided will remain **confidential** and will be used by a college financial aid administrator to help determine the student's dependency status for Federal Title IV financial aid eligibility. Please provide your written statement to the student for submission with his or her **Dependency Status Change Request** form.

Sincerely,

Solano Community College
Financial Aid Office