2020-2021 Appeal for Financial Aid as an Independent Student

RENEWAL APPLICATION

(Please read this form carefully. Filing this form does not guarantee that your appeal will be approved.)

Last Name	First Name	M.I.	Student ID #

Street	City	State	Zip

Phone #	Preferred Email address

You are considered an INDEPENDENT STUDENT for Financial Aid purposes if you meet one of the following conditions at the time you complete and sign the 2020-2021 Free Application for Federal Student Aid (FAFSA):

- You will be 24 years old by December 31, 2020. (Born before January 1, 1997)
- You are/were in foster care, a dependent or ward of the court, or both of your parents were deceased at any time since you turned age 13
- You are a veteran of the U.S. Armed Forces, or currently serving on active duty (for purposes other than training).
- You are a graduate student working on a post-baccalaureate degree
- You are married
- You have children, or legal dependents, other than a spouse, who meet the definition of a legal dependent found in the FAFSA instructions
- You are/were emancipated as a minor by a court*
- You are/were in legal guardianship as determined by a court*
- You are/were a homeless unaccompanied youth as determined by your high school liaison on or after July 1, 2019*
- You are/were a homeless unaccompanied youth as determined by the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development after July 1, 2019*
- You are/were an unaccompanied youth who was homeless or self-supporting and at risk of being homeless as determined by the director of a runaway or homeless youth basic center or transitional living program after July 1, 2019*

*Note: If you meet one of the above conditions you do not need to complete this appeal, however, documentation must be sent to the Financial Aid Office. Please reference the “Confirmation of Independence” form.

There are situations when truly independent students do not meet the requirements listed above. Financial Aid Advisors have the authority to override independence criteria on a case-by-case basis when “extenuating family circumstances” exist. A renewal petition is for students who have already been reviewed and approved by Oswego’s Financial Aid Office in a previous year. Appeals do not apply to NYS awards.

To petition for a renewal of an independence appeal, please submit:

- This completed form
- 20/21 FAFSA electronically using “instructions for students unable to provide parental information”
- Tax forms or other proof of income
- Letter if necessary – see certification portion on the back of this form
Once all documentation is received your petition will be reviewed and you will be informed of the results. You and/or your parents may be asked for additional documentation to determine your dependency status. You will receive further instructions if your petition is denied. Renewal appeals are valid for one year only. You must submit a renewal appeal for each year you wish to receive an override. Please be sure your e-mail provided is a valid address you monitor regularly.

1. What was your total taxable income (all earned income) for 2018? $ ______________
   This includes wages earned from a job even if you did not file a tax return.

2. What was the total of all of your untaxed income for 2018? $ ______________
   Please identify the amount and source of each type of untaxed income below: (ex: unemployment, social security, etc.)

3. ATTACH a copy of your 2018 tax return. If you did not file, attach a copy of your last paycheck stub(s) from 2018,
   preferably showing your year-to-date earnings or 2018 W-2 wage statement, and a statement of any untaxed income you
   received.

4. If you report “0” income, please explain how you supported yourself as an independent student for the past 12 months
   (including summer).

5. Include all addresses at which you have resided since your last petition on a separate sheet. If you live in a residence hall
during the year, include the address where you stay during the summer and when the residence halls are closed. Please list
all members of that household.

Certification: Please choose one of the following options:

1. I attest that the conditions used to determine my independent status have not changed. I have not resided with my
   parent(s) and have lived independently since my last petition.

   ____________________________  ____________________________
   Signature                     Date

2. There has been a change since my original petition, but I feel I still meet the criteria for an override.
   *Please describe these changes either below or on a separate sheet and sign below.

   ____________________________  ____________________________
   Signature                     Date

Please return this form and all required documentation to:

SUNY Oswego - Financial Aid Office, 206 Culkin Hall Oswego, NY 13126.

**Explanations (use additional sheets if necessary):**