Although you do not meet the requirements to be considered an independent student for financial aid purposes, you believe your particular family circumstances warrant further evaluation. This form will allow you to request special consideration of your student status for financial aid purposes for 2014–2015.

The following documentation must be submitted before we can review your appeal:

1. Verification of your 2013 Income (2013 Federal Tax Return Transcript and copies of all W-2 forms)
2. Detailed letter explaining your family circumstances (use attached form). Attach copies of any police or custody reports or similar materials to support your appeal. Information will be kept confidential.
3. Two detailed letters from sources outside your family familiar with your family circumstances. The sources must be a teacher, minister, lawyer, physician, counselor or other professional who is willing to verify your circumstances upon request. Each source should explain: 1) Why they feel you should be considered independent; 2) How they know you and your situation and for how long they have known you (use attached forms).

Answer the following questions:

1. What is the most recent date you received support from or lived with your parents? ________________
   (Support includes: cash, housing, food, gifts, medical insurance, loans, college costs, etc.)

2. Did or will your parent(s) claim you as a tax exemption in 2013? Yes ___ No ___

3. Were you, or will you be, claimed as a tax exemption by anyone in 2013 or 2014? Yes ___ No ___
   If yes, who? __________________________ Relationship to you __________________________

4. Have you submitted a 2014-2015 Free Application for Federal Student Aid (FAFSA)? Yes ___ No ___
   Note: If you have not yet submitted your FAFSA, you may attach the completed and signed application to this appeal for expedited processing.

5. I was approved for a Dependency Appeal in 2013-2014. Yes ___ No ___

6. Are you:
   □ A dependent or ward of court since turning age 13
   □ Currently an emancipated minor
   □ Currently or was in legal guardianship
   □ Homeless or at risk of being homeless
   □ In foster care since turning age 13
   
   Note: If you answered “yes” to any items in Question 5 you do not need to complete this appeal. You should complete the “Dependency Status Verification”. Form at www.luc.edu/finaid/forms.shtml.

Note: If a Dependency Appeal was approved at Loyola in 2013-2014, you only need to complete pages 1 & 2.
7. Verification of Your 2013 Income:

_____ I have attached a copy of my 2013 Federal Tax Return Transcript and copies of all W-2 forms.

We can no longer accept a preparer’s copy of tax returns. You may order a Tax Return Transcript from the Internal Revenue Service online at [www.irs.gov](http://www.irs.gov) or by phone at 1-800-908-9946.

_____ I have not and will not file a 2013 Federal Tax Return. During 2013, I had income/earnings from the following source(s): (Attach copies of these W-2 Forms)

1) ___________________________________________ $ _________________

2) ___________________________________________ $ _________________

8. Verification of Current Living Arrangements

_____ I have attached a copy of my current lease or rental arrangement.

_____ I do not have a current lease or rental agreement for my place of residence. However, I am providing a signed statement from my current landlord/roommate verifying my tenancy include the following information: 1) address of residence; 2) first date of tenancy; 3) monthly amount of rent paid.

Explain why you believe you should be considered independent. Your explanation should include information about your relationship with your parents since you were 16 years old. You must indicate where you have been living for the past two years, and include how you have been supporting yourself. You may attach additional sheets to fully explain your circumstances.

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I affirm the foregoing is true and correct to the best of my knowledge. I agree to supply additional documentation to the Loyola University Chicago Financial Aid Office, if requested.

Student Signature: ___________________________ Date: _____________________
I grant the person signing this form permission to respond to inquiries by the Loyola University Chicago Financial Aid Office concerning my circumstances.

Student Signature: ____________________________

**SOURCE 1**

Explain why you feel this student should be considered independent including, how you know the student and for how long. You may attach additional documentation that you feel supports this appeal.

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I am familiar with the above named student's family circumstances. I affirm the information provided by me is true and correct. I agree to respond to inquiries by the Loyola University Chicago Financial Aid Office concerning this student's circumstances.

Signature: ____________________________ Date: ____________________________

Printed Name: ____________________________ Job Title: ____________________________

Address: ____________________________ Phone: ____________________________

Relationship to Student: ____________________________

Number of Years Acquainted with Student: ____________
Student Name: ____________________________ Loyola ID: ____________________________
(Please print) (Your 11-digit Loyola ID number begins 0000.)

I grant the person signing this form permission to respond to inquiries by the Loyola University Chicago Financial Aid Office concerning my circumstances.

Student Signature: ____________________________

SOURCE 2

Explain why you feel this student should be considered independent including, how you know the student and for how long. You may attach additional documentation that you feel supports this appeal.

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I am familiar with the above named student's family circumstances. I affirm the information provided by me is true and correct. I agree to respond to inquiries by the Loyola University Chicago Financial Aid Office concerning this student's circumstances.

Signature: ____________________________ Date: ____________________________

Printed Name: ____________________________ Job Title: ____________________________

Address: ____________________________ Phone: ____________________________

Relationship to Student: ____________________________

Number of Years Acquainted with Student: ____________________________