## 2020-2021

## **Independent Appeal Form**

If you did NOT live with your parents, indicate the last

Student Name:	month/year you did live with them.  What was the last year you were claimed on your parents' tax return?			
Please read all instructions carefully!				
Marymount, in keeping with the Federal Government's established need analysis process,	2. What is the amount of cash financial support you receive from your parents per year? \$			
has an awarding procedure to ensure the equitable and consistent consideration of each financial aid applicant's family financial situation. In order to determine your dependency status, we need	3. What other support do you receive from your parents? Identify the type and provide the "cash value" of this support.			
additional information regarding your living expenses and your sources of support.	Туре	Value (	(per month)	
Tax filing status does not indicate	Room & Board	\$		
independence for financial aid purposes. According to federal definition, parents and students have the	Health/Auto Insurance	\$		
primary responsibility for funding the student's education-financial aid is considered a supplement.	Other (please list)	\$		
Circumstances that may document independence are abandonment or estrangement from parents, parents whose whereabouts are unknown, or court or social services intervention in the family.	4. What support do you receive from someone other than your parents? Identify the type and provide the "cash value" of this support. Relationship of person providing support:			
This form will act as your proof of independent financial status. Please answer	Туре	Value (	Value (per month)	
completely all items below. If a value is zero, place a zero in the space provided. Be sure to review the	Room & Board	\$		
'Other Requested Items' section on the back of this form, sign and date the certification statement, and	Health/Auto Insurance			
return this form to the Financial Aid Office.  Note: the term parent(s) refers to	Other (please list)			
parent(s) or step-parent(s).	5. Please indicate the amount and the source(s) of your annual income for 2019 (i.e. wages, monetary gifts from other than your			
Important - Incomplete forms and forms submitted without requested documentation will not be considered. Appeals are handled on a case-by-case basis by the	parents, interest income, etc.). Note: include public assistance payments such as TANF, food stamps, rent subsidies, welfare, unemployment, etc.			
Financial Aid Appeal Committee. You will be notified in writing of the Committee's decision. All Committee decisions	Source		Income (per month)	
are final.	Cash gifts from:	_	\$	
OUESTIONS:  1. Did you live with your parents during 2019?	Wages from employment		\$	
Indicate the number of weeks:	TANF/Welfare/Unemplo		\$	
Did you live with them during 2019?	Rent subsidies/Food stan	•	\$	
Indicate the number of weeks:	Other (please list)OVER PLEASE>		\$	
	OVERTLEASE>			

expenses? (If none, indicate zero	on the amount line.)
Type of Aid	Amt. used to live/year
Scholarships/grants	\$
Financial aid loans	\$
Financial aid employment	\$
7. Have you borrowed any mone years?	y to live on in the last two
Year Type of loan Amt. b	porrowed Amt. still owed
How are you making payments or	1 the above loans?
If no normants on the charalteen	a shook how
If no payments on the above loans	
8. Complete the following statem	nent of your monthly expenses:
Housing	\$
Food Car (payments, gas,	\$ \$
insurance, maintenance, bus fare)	
Child care Personal (clothing or entertain	ment) \$\$
Medical Expenses (not reimbu Other (please list)	
9. Do you have roommates?	
How many do you have?	
10. If you have not lived at your years, give prior addresses and pe	
Address	
From/ to/	<u></u>
Address	
From/ to/	<u></u>
Address	
From / to /	

6. What financial aid resources have you used for living

**Other Required Items:** (Submit *all 3 items* below with this form)

**Supporting Statement.** Obtain a minimum of one supporting statement written by an adult, extended family member, human service agency personnel member, clergy member, etc. who is familiar with your situation. This person should present only the facts and details considered necessary to document this request for self-supporting status. This statement should be on an agency letterhead whenever possible. This should NOT take the form of a personal recommendation.

**Lease Agreement.** Submit a signed copy of your lease agreement or other signed document on appropriate letterhead when possible. This document should verify the amount you pay per month in rent.

**Student Statement.** Submit a signed personal statement detailing any unusual circumstances that support your appeal for independent student status. State specific reasons why you feel you are independent such as abandonment/estrangement from parents, parents' whereabouts unknown, etc. All information will be held strictly confidential. We need to have complete information in order to assist you.

I agree all information provided by me or any other on this form and the supporting documents is true and complete to the best of my knowledge.

Signature_	Date	
~1511dtd1	2 400	

Please submit the form and all supporting documents to the Office of Financial Aid.



Marymount University Office of Financial Aid Rowley 1008 2807 North Glebe Road, Arlington, VA 22207-4299

Fax: (703) 516-4771

Email financial.aid@marymount.edu