

2024-25 Dependent Status Appeal

Section A: Appeal Reason

In order to be considered for a dependency appeal, you must be able to document that all financial and emotional contact with your parents has been severed as a result of an adverse home situation. Some examples of adverse conditions include severe estrangement from parents, physical or emotional abuse, an unsafe home environment, and abandonment. Appeal decisions are made on a case-by-case basis and will be sent to your Bulldog e-mail. Reasons that cannot be considered include demonstrating financial self-sufficiency, your parent(s) not claiming you on their taxes, and parent(s) unwillingness or inability to contribute financially.

Appeal Reason	Required Documentation
☐ I have an adverse home situation.	· A signed and dated letter from you explaining your situation; AND · A signed and dated letter from a third party such as a teacher, counselor, clergyman, doctor, or law enforcement officer who has direct knowledge of your situation. The letter must be written on the letterhead of the agency where the professional is employed and must substantiate the existence of the adverse family situation.
☐ My parents are unwilling to provide information on my financial aid application or required verification documents. Please note that you may only be eligible for a Federal Direct Unsubsidized Loan without completing a FAFSA.	 A signed and dated letter from you explaining your situation; AND A signed and dated letter from your parent indicating that they are unwilling to provide information on the FAFSA; OR If parent refuses to provide any documentation you will need to submit documentation from a third party such as a teacher, counselor, clergyman, or court.
☐ I have an adverse home situation that was documented in a prior year at McPherson College and I certify my situation has not changed for the 2024-2025 academic year.	· No documentation required.

Section B: Student Certification

Section B: 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, withdrawal and/or repayment of financial aid and referral to the appropriate authorities.

Print Student Name Student Signature Date