

SUNY Sullivan
 Financial Aid Office
 112 College Road
 Loch Sheldrake, NY 12759
 Fax# (845) 434-0014
 www.sunysullivan.edu

REQUEST FOR INDEPENDENT STATUS FOR 2017-2018

Student's Name: _____ Student ID#: _____

If you do not meet the criteria set on the FAFSA for independent status you may appeal to the Director of Financial Aid to override dependency status. If you do not meet the criteria, you will be evaluated as a Dependent Student, meaning that your parent(s) must provide income and asset information. **To be considered as an Independent Student you must provide copies of your parent's 2015 and 2016 Federal IRS Tax Return Transcripts in addition to your 2015 and 2016 Federal IRS Tax Return Transcripts.** (You can request a copy of the IRS Tax Return Transcripts on-line at www.irs.gov. Also, please use the worksheet below to document 2015 and 2016 income and expenses (please attach documentation of other income reported below that does not appear on tax returns.) **Also, please submit a current paystub.**

| 2015 | Sources of Income | 2016 |
|----------|-------------------|----------|
| _____ | | |
| _____ | | |
| _____ | | |
| _____ | | |
| _____ | | |
| _____ | | |
| \$ _____ | Total | \$ _____ |

Attach copies of rent receipts (beginning and current copy only) or copy of lease. Attach old copy of utilities bills to show that they are in your name. **Attach any other vital information about expenses** which will help establish your independent status.

| 2015 | Expenses | 2016 |
|----------|----------------|----------|
| _____ | Housing | _____ |
| _____ | Food | _____ |
| _____ | Transportation | _____ |
| _____ | Utilities | _____ |
| _____ | Personal | _____ |
| _____ | Other | _____ |
| \$ _____ | Total | \$ _____ |

By signing this worksheet, I certify that all of the information reported to qualify for Federal Student Aid is complete and correct. **Warning:** If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

Student's Signature: _____ Date: _____