

2009 - 2010 REQUEST FOR APPEAL INDEPENDENT STUDENT STATUS



PLEASE PRINT LEGIBLY IN INK.

STUDENT'S LAST NAME (LEGAL NAME)		FIRST NAME	MI
STUDENT ID#	E-MAIL ADDRESS	BEST CONTACT PHONE NUMBER	

Students appealing for independent status must submit this form with all supporting documentation as defined below.

1. Yes No Have you received support (gifts, money, loans, food, clothes, medical care, dental care, transportation, etc.) from your parent(s) during 2008?

If yes, how much support (gifts, money, loans, food, clothes, medical care, dental care, transportation, etc.) did your parent(s) provide during 2008?

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2. / / When was the date (MM/DD/YY) you last lived with your parent(s)?

3. / / When was the date (MM/DD/YY) of the last time you had contact with your parent(s)?

4. Submit the following:

- a. A signed, typed and detailed statement of your situation stating how you have supported yourself during 2008. Indicate the amounts and sources of income.
- b. If you are living off-campus, provide a copy of your rental leases/agreements or statements from your landlord(s) with documentation of rent paid.
- c. A letter confirming your situation (*preferably on letterhead*) from your minister, social worker, teacher, counselor, etc. who is familiar with your situation. This letter must include:
 - 1) The length of time the person has known you.
 - 2) How the person is aware of your situation and his/her relationship to you.
 - 3) Reason you do not receive parental support (*to the best of his/her knowledge*).

CERTIFICATION STATEMENT:

PLEASE NOTE: REQUESTS RECEIVED WITHOUT A TYPED EXPLANATION OR SUPPORTING DOCUMENTS WILL BE RETURNED WITHOUT CONSIDERATION. By signing, you certify that you have not purposely provided false or misleading information. Be aware that the SFS Office may request additional documentation from you in support of your appeal. Your submission and any subsequent approval of an appeal does not guarantee that your eligibility for financial aid will change.

STUDENT'S SIGNATURE

DATE

FOR OFFICE USE ONLY

- Approved Denied

Comments: _____

FAO SIGNATURE

DATE

Rev. 02/09 md

Please Return Completed Form with **SIGNED** Copies of Your Federal Tax Returns with **All** Tax Schedules, and **W-2** Forms to Your PLNU Regional Center:

PLNU Arcadia
225 E Santa Clara St.
Arcadia, CA 91006
Phone: 626.821.8240
Fax: 626.821.8249

PLNU Bakersfield
5080 California Ave., Ste. 104
Bakersfield, CA 93309
Phone: 661.321.3482 or 3484
Fax: 661.321.3489

PLNU Inland Empire
1255 Magnolia Ave, Ste. 101
Corona, CA 92879
Phone: 951.273.7568
Fax: 951.735.0072

PLNU Mission Valley
4007 Camino del Rio S., Ste. 102
San Diego, CA 92108
Phone: 619.563.2845 or 2849
Fax: 619.563.2898