

2009-2010
West Valley/Mission Community College District
Student Financial Aid

REQUEST FOR REVIEW OF DEPENDENCY STATUS

The Financial Aid Office is required by federal law {Public Law 102-325, Sec 480(d)} to consider parent information and expect a parent contribution for students unless the student meets one of the following conditions:

1. is 24 years of age or older by December 31 of the award year (i.e., December 31, 2009 for enrollment period beginning between July 1, 2009 and June 30, 2010);
2. is an orphan, ward of the court or current/former foster youth since the age of 13;
3. is a veteran of the Armed Forces;
4. is a graduate or professional student;
5. is a married individual;
6. has legal dependents other than a spouse;
7. is an emancipated minor as determined by a court,
8. is an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless;or
9. is a student for whom a financial aid administrator makes documented determination of independence by reason of other unusual circumstances.

Unusual Circumstances

We may be able to override your dependent status if unusual circumstances exist that make it impossible for you to have contact with your parents. Examples of unusual circumstances are: a parent is in prison or is hospitalized; you have been physically, sexually, verbally or mentally abused by one or both parents; you moved out of your parent's home when you were under 18 years of age; your parents live out of the country and you are unable to maintain reasonable contact with them. If your family situation involves an unusual circumstances such as those described above, you may request a review of your dependency status.

Required Documentations

In order for our office to consider your request for a review of your dependency status, we need additional information and documentation of your family circumstances. You must complete ALL of the attached forms:

- Completion of "Student's Statement of Information:, and
- Completion of two (2) " Affidavit In Lieu Of Parent Information" (from two (2) different people); each one MUST be a person who is at least 25 years old and who has known the student a minimum of 3 years (e.g. clergy, teachers, counselors, courts, social workers, medical personnel, prison administrators or other adult relatives who will verify your situation).

SUBMIT APPROPRIATE FORMS AND PERTINENT DOCUMENTS TO THE FINANCIAL AID OFFICE AND SCHEDULE AN APPOINTMENT WITH ROEHL GALANG AT (408) 855-5071.

Affidavit In Lieu Of Parent Information

(To Be Completed by a Third Party who has known the student at least 3 years and is at least 25 years old.)

_____ Student's Name _____ Soc. Sec. #

The student named above has indicated on the application for financial aid that he/she is unable to provide parent information due to unusual circumstances.

1. How long have you known the student? _____ (Must be a minimum of 3 years)
2. Please provide a brief statement regarding your knowledge of the student's family history and relationship with parents.

3. Why is the student unable to provide parent information for financial aid purposes?

4. What is the last date the student:

Received financial support from parents? _____
Month Year

Lived with parents? _____
Month Year

5. How is the student currently supporting himself/herself?

Declarant's Name: (Print) _____ Age: _____

Contact Phone # _____ Relationship to Student: _____

Address: _____

Occupation: _____

I HEREBY CERTIFY THAT THE ABOVE INFORMATION CONTAINED IN STATEMENTS IS TRUE AND COMPLETE.

Signature of Declarant

Date