



RETURN TO: Office of Financial Aid | 101 Gates Hall
 1900 W. 7th Street, CMB #1266, Plainview, TX 79072
 finaid(yourcampus)@wvu.edu or finaidhelp@wvu.edu (Plainview)

Student's Name _____ Student ID _____
Last First

This form is intended for use by students who are dependent of their parents according to the Free Application for Federal Student Aid (FAFSA®) definition, however due to _____, wish to request to be considered independent. If you can document why you should be considered independent for reasons beyond your control, you may petition for a waiver of federal regulations requiring parental information. In your petition, you should document as much as possible to support your claim. If you have decided to live on your own or are over the age of 18, this does not make you independent.

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| | | Parent(s)'s Death Certificate Ward of the Court documentation (e.g., Order of Disposition) Documentation from social worker/Child Protective Services Adoption Certificate |
| | | Court documentation approving/granting emancipation |
| | | Court documentation issuing legal guardianship |
| | | Documentation or statement from local homeless student liaison (McKinney-Vento liaison) from your high school Up to 2 (in addition to McKinney-Vento) statements from unrelated parties validating your circumstances (e.g., pastor/clergy member, school counselor, teacher, social worker) |
| | | Detailed explanation of circumstances including dates or timeline Documentation of monthly expenses and income/resources used to meet those expenses Court or law enforcement documents supporting your circumstances Up to 3 statements (one may be McKinney-Vento liaison) from unrelated parties validating your circumstances (e.g., pastor/clergy member, school counselor, teacher, social worker) |

Please use the space below to explain any information on this form or expand upon your circumstances. Attach a separate document if more space is needed.

I certify that the information provided on this form is accurate and complete as of this date. I understand that the request of a financial aid reevaluation is not guaranteed to result in a change to my financial aid eligibility and does not release me from payment of any balance due on my student account.

Student Signature _____ Date _____