

09-10



Office of Student Financial Aid
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Fax: (812) 237-4330 or (812) 237-3925
Email: finaid@indstate.edu
Web: www.indstate.edu/finaid

Section II

_____ Check here if this is your **subsequent appeal** and provide the items listed below. Also, attach any supporting documents listed in Section III.

- **A detailed signed letter from you** reaffirming your family relationship and the circumstances causing the irreparable family situation.
- **One detailed signed letter from another party** reaffirming your family situation. These may be from an adult relative, teacher, counselor, or minister. Use of letterhead is encouraged.
- A completed paper FAFSA.
- A completed Independent Verification Worksheet.
- A copy of your current year federal income tax return.
- Submit **this form** signed and dated.

Special Note: If you reference supporting documentation submitted with a prior appeal and the information is no longer valid, your appeal will be denied.

Section III

Additional supporting information may include the following:

- Copies of any official documents that support your request. Such items may include court documents, death certificates, police reports, or other official records.
- Any other document which may help to clarify your need for a change in dependency status.

Special Note: If your appeal is **denied**, you will be required to include parental information on the FAFSA, complete a Dependent Verification Worksheet, and submit signed copies of your parents Federal Income Tax return for the current tax year.

Section V

Certification and Signature

I understand the requirements outlined above and certify that all the information submitted is complete and accurate. The decision made by Financial Aid is final. I will be notified once my request has been reviewed. If my appeal is granted, my financial aid status will be updated by the federal processor.

Student Signature (*required*)

Date