



Office of Financial Aid

2026-2027 Professional Judgement  
Unusual Circumstances

Federal student aid guidelines consider undergraduate students dependent on their parents until age 24, and financial aid eligibility is calculated using parent financial information. However, a student may have extenuating circumstances that require consideration for independent status.

**SECTION A: STUDENT INFORMATION**

Name: \_\_\_\_\_ Student ID Number \_\_\_\_\_

Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Email Address: \_\_\_\_\_

**SECTION B: STUDENT'S STATEMENT**

**Submit the following**

- Attach a detailed personal statement explaining the circumstances of your appeal. If your history includes legal court documentation, include the dates of those actions as well as the nature of those as well.

Note: The following conditions, singly or in combination, **DO NOT** qualify as unusual circumstances meriting a dependency override:

1. Parents refuse to contribute to the student's education.
2. Parents will not provide information on the FAFSA or verification.
3. Parents do not claim the student as a dependent for income tax purposes.
4. Student demonstrates total self-sufficiency.

**SECTION C: DOCUMENTATION MAY INCLUDE**

- Attach a notarized statement from an adult who can verify the family circumstances described in your personal statement. The letter can be from a friend or family who can verify your situation.
- Attach a letter on letterhead from an adult professional, (ie: social workers, teachers, high school counselors, doctors, members of the clergy, etc) who is not personally connected to you. Court documentation, if applicable to the situation described, may be considered a statement from an adult professional.
- If you are submitting an appeal due to a death of a parent, attach a copy of the death certificate.
- If you are submitting an appeal due to incarceration, attach proof of parent's incarceration.
- If you are submitting an appeal due to parental incapacitation, attach a letter from the parent's doctor explaining the parent's condition.

**SECTION D: VERIFICATION**

If your 2026-227 FAFSA is selected for verification, you will be notified through your student email of documents you need to submit for the verification process.

**SECTION D: CERTIFICATION AND SIGNATURES**

I certify that all of the information on this form, and documentation, are true and complete to the best of my knowledge. Furthermore, I affirm that I have not knowingly or intentionally provided any false or fraudulent documentation.

\_\_\_\_\_  
Print Student's Name

\_\_\_\_\_  
Student's ID Number

\_\_\_\_\_  
Student's Signature (Required)

\_\_\_\_\_  
Date

**Return this form and ALL documentation to the MTC Financial Aid Office.**

**OFFICE USE ONLY**

Appeal Approved?  Yes  No If no, why? \_\_\_\_\_

Signature of FA Approver: \_\_\_\_\_ Date: \_\_\_\_\_