

2026-27
DEPENDENCY APPEAL

COMPLETE WITH BLACK INK ONLY.

Complete this form if you do not meet the criteria for independent student status or you have a Provisional Independent Status on the 2026-27 Free Application for Federal Student Aid (FAFSA), and you wish to present documentation to support a review of your dependency status. The chart below outlines the types of situations that may be considered, as well as suggested documentation to support each situation. Once your Dependency Appeal and all supporting documentation has been received, please allow up to 5 business days for your appeal to be processed.

Possible Situations and Suggested Documentation

Situation	Suggested Documentation
ABANDONMENT: Your parents have abandoned you, you have no contact with your parents, and you have been under the care of another adult or have been supporting yourself since that abandonment.	<ul style="list-style-type: none"> • A letter from your high school guidance counselor and • A letter (on agency letterhead) from a counselor/therapist or other professional source who is personally familiar with your situation.
ENDANGERMENT: You and your parents have severed all contact due to circumstances that would constitute endangerment (physical or psychological) to you.	<ul style="list-style-type: none"> • Court documentation or police report(s) and • A letter (on agency letterhead) from a counselor/therapist or other professional source who is personally familiar with your situation.
INCARCERATION: Your parent (in a single parent family) is incarcerated and you have no contact with your other parent, or both of your parents (in a two parent family) are incarcerated.	<ul style="list-style-type: none"> • Current proof of incarceration and • A letter (on agency letterhead) from a counselor/therapist or other professional source who is personally familiar with your situation.
DEATH OF PARENT: Your supporting parent is deceased and you have no contact with your surviving parent.	<ul style="list-style-type: none"> • A copy of your parent's death certificate and • A letter (on agency letterhead) from a counselor/therapist or other professional source who is personally familiar with your situation.
VICTIM OF HUMAN TRAFFICKING: You have been certified to be a victim of a severe form of trafficking by the Office of Refugee Resettlement (ORR) or the U.S. Department of Health and Human Services (HHS).	<ul style="list-style-type: none"> • Unexpired, original certification letter (submitted in person to the Office of Student Financial Aid or Rocket Solution Central).
REFUGEE or ASYLEE: You have been granted refugee or asylee status by U.S. Citizenship and Immigration Services (USCIS) and are separated from your parents, or your parents are displaced in a foreign country.	<ul style="list-style-type: none"> • Unexpired, original entry status documentation that identifies your current or prior status as a refugee or asylee (submitted in person to the Office of Student Financial Aid or Rocket Solution Central).

It is your responsibility to identify the parties who may be able to help you document your situation. Suggested sources are listed below. Your source(s) must be personally familiar with your family situation.

- Minister
- Attorney
- Teacher/professor
- Caseworker
- Doctor
- Counselor/therapist
- University administrator
- Relative (not a parent)

Letters from parents are not acceptable.

Any letter submitted as documentation from a professional source should be on agency letterhead, if appropriate, and should include:

1. Your name.
2. The nature of the writer's relationship to you and the length of time they have known you.
3. **The reason(s) why you cannot provide your parents' information on the FAFSA.**
4. The writer's name, signature, address, and telephone number.

Please note: Upon receipt of your documentation, it may be necessary to request additional information to clarify or supplement documentation already submitted. You will be notified by email if additional information is needed.



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Please print all information.

Student Rocket Number: R _____ Rocket E-mail: _____
Last Name: _____ First Name: _____
Home Phone: _____ Cell Phone: _____
Street Address: _____ City: _____
State: _____ Zip Code: _____

REQUIRED STEPS:

1. File a 2026-27 FAFSA at *studentaid.gov*. If you are unable to provide parent information, you will indicate this on the FAFSA.
2. Explain the unusual or mitigating circumstances between you and your parent(s), including why you cannot provide parent information and a parent signature on your 2026-27 FAFSA. If you provide a written statement on a separate page, that statement must include your handwritten signature (using your full legal name) and date of statement.

3. Submit documentation to support a review of your dependency status.
4. Complete and submit the 2026-27 Independent Student Family Size Worksheet, available at *utoledo.edu/financialaid/forms/*.

YOUR HANDWRITTEN SIGNATURE AND DATE ARE REQUIRED BELOW.

ELECTRONIC SIGNATURES ARE NOT ACCEPTABLE ON THIS FORM.

Certification Statement: I certify that all of the information and documentation provided for my dependency appeal is complete and correct. I understand that I must attach supporting documentation in order to be considered for independent student status, and that additional documentation may be requested by the Office of Student Financial Aid before a final determination is made. **WARNING:** If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

Student Signature (using full legal name) _____ Date _____

For office use only

☐ Approved ☐ Denied

OSFA Signature _____

Date _____

How was the student contacted regarding the result of this appeal?

- ☐ Student Notified by Rocket email (Retain a copy for OSFA)
- ☐ Student was notified in person on: _____
- ☐ Student was notified by phone call on: _____

TO RETURN THIS FORM:

Upload to: *myUT.utoledo.edu*
"My Financial Aid"
"Financial Aid Documentation Upload"

Mail to: The University of Toledo
Office of Student Financial Aid
2801 West Bancroft Street, Mail Stop 314
Toledo, OH 43606-3390

In person: Rocket Solution Central
1200 Rocket Hall

Fax to: 419.530.5835

Questions? Please contact Rocket Solution Central (RSC) at 419.530.8700.