



Return this form to:
Mail: HCC Financial Aid
 606 West Main
 Highland KS, 66035
Email: financialaid@highlandcc.edu
Fax: 785-442-6106
Phone: 785-442-6000 ext. 2002

2025-2026 Unusual (Dependency) Circumstances Appeal

Student Information

Last Name	First Name	MI	Student ID
Date of Birth	Telephone Number	E-Mail Address	

Please be aware that submitting an appeal does not guarantee an adjustment will be made.

This form is used to explain a situation you think warrants a change to your FAFSA to look at only your information and not your parents'. **You must provide documents that support your statement.** Appeals without documentation will not be reviewed. Acceptable documentation includes court documents, a written statement from an attorney, caseworker, counselor, guardian ad litem, or clergy, or other documents that help explain your situation. Documentation needs to be as detailed as possible.

Unusual circumstances may include, but are not limited to:

- Abuse by parents or other family members living within the home.
- Abandonment by parents whether voluntary or involuntary.
- Entering the United States as a refugee without parents and limited or no access to parents.

Unusual circumstances **do not** include:

- Parents' refusal to contribute toward your education.
- Parents' unwillingness to provide income information needed to apply for aid.
- Parents not claiming you as a dependent for income tax purposes
- Claiming yourself on your income tax return.
- Living on your own and paying your own expenses.

Step 1—Personal Information

I have been living on my own since _____

I have provided for myself by _____

Step 2—Parental Information

My mother's current location is: _____

Date of last contact: _____

Reason for no contact: _____

My father's current location is: _____

Date of last contact: _____

Reason for no contact: _____

Step 3—Attach a detailed, typed explanation of unusual circumstances—be *specific*. All information provided is confidential.

Step 4—Documentation

I have attached statements from two adults

(preferably a case worker, counselor, attorney, religious leader, grandparent, aunt, uncle, etc.)

1. Name _____ Relationship to student _____

Address _____

City _____ State _____ Zip _____ Phone _____

2. Name _____ Relationship to student _____

Address _____

City _____ State _____ Zip _____ Phone _____

Check mark the documentation you are attaching to support your request.

- Legal Documentation
- Police Report
- Report or letter from the Division of Child and Family Services
- Letter from the agency that sponsored me into the United States of America stating I entered the country as an unaccompanied minor

Copies of my most recent Federal Income Tax Forms

Copy of my rental/lease agreement or utility bills

Other _____

Step 5—Certification

I certify all of the information in this request is true and accurate.

Student Signature _____ Date _____

Signature must be handwritten; digital signatures not accepted.

Warning: If you purposely give false or misleading information on this form, you may be fined, sentenced to jail or both.