



Lansing Community College  
 1121 – Financial Aid Office  
 Room 203, Gannon Building  
 PO Box 40010  
 Lansing, MI 48901-7210  
 Phone: (517) 483-1200 option 2  
 Fax: (517) 483-1170  
 financial\_aid@lcc.edu

## Financial Aid Dependency Appeal 2011-2012

**Please use blue or black ink when completing this form.**

Student Name: \_\_\_\_\_ LCC Student #: \_\_\_\_\_

The U.S. Department of Education policy states the parents have the primary responsibility for paying the cost of education. If, however, a student can **demonstrate lack of financial support and/or an unintentional, involuntary, and uncontrollable break in the relationship between parent(s) and student due to abuse, neglect, or refugee status**, Lansing Community College may be able to revise the student's dependency status for financial aid purposes.

**1. Circle the best answer for the following questions:**

**a. My parents are willing to help me complete the FAFSA.**

Strongly Agree      Agree      Not Sure      Disagree      Strongly Disagree

**b. My parents are willing to help with my housing, food, insurance, & utility bills.**

Completely      Mostly      Not Sure      Very Little      None

**2. File Free Application for Federal Student Aid (FAFSA)**

Please submit your FAFSA on line at [www.fafsa.gov](http://www.fafsa.gov). LCC school code is 002278

**3. Submit ALL of the following documents to the Financial Aid Office.** (You may be contacted to schedule an appointment with a Financial Aid Advisor to complete this process)

- Personal Statement**  
Please write a statement explaining why you should be considered independent. Describe the circumstances of the separation from your parent(s) and the status of your current relationship with them.
- Professional Letter**  
Provide a letter from a professional adult that verifies the circumstances you described in your personal statement. The letter must be signed, dated, and on letterhead. Professional adults include, but are not limited to, clergy members, guidance counselors, teachers, doctors, family counselors, mental health professionals, and law enforcement officers.
- Complete the Family Table and Income Worksheet**  
Family Table and Income Worksheet are found below and on page 2.
- Signed copy of your 2010 Federal Income Tax return (if applicable)**
- Documentation**  
If any of the following exist, provide: a) a copy of the parent(s) death certificate, b) proof of parent(s) incarceration, c) proof that the parent(s) are in a long term care facility such as rehabilitation or mental health facility, d) police reports, or e) court documents verifying the situation with the parent(s).
- Secondary Letter (Recommended)**  
Provide a letter from a relative or friend who is aware of your family situation. The letter should state the writer's address, phone number, and relationship to you, along with his/her knowledge of the events that lead to your separation from your parent(s), and the nature of your relationship with your parent(s) as he/she understands it to be currently.

**4. Complete the following tables; do not leave any area blank. If needed, put a "0".**

**Family Table** (List yourself)

Name	Age	Relationship Self	College/University LCC

**Household Tax Forms and Income Information – Calendar Year 2010**

**Tax Returns** include the 2010 Federal IRS Form 1040, 1040A, 1040EZ or a tax return from Puerto Rico or a foreign income tax return.

**All Students**

- Attached is my **signed** 2010 Federal tax return
- I will not and am not required to file a 2010 Federal income tax return
  - Attach W-2 forms or other earning statements
  - Income earned from work \$ \_\_\_\_\_
  - Employer Name \_\_\_\_\_

**Sources of Untaxed Income and Additional Financial Information**

<b>Student</b>	<b>Report annual amounts for 2010</b> (Do not leave any spaces blank. If zero, please write \$0) See Questions 44, 45, 92 & 93 of the FAFSA
\$ _____	Tax-Deferred Pension and savings plans paid directly or withheld from earnings. Including, but not limited to amounts W-2 in boxes 12a -12d, codes D, E, F, G, H and S.
\$ _____	Child Support <b>Received</b> for any children (do not include foster children).
\$ _____	Workman's Compensation
\$ _____	Any other untaxed income/benefits not reported elsewhere on this worksheet
\$ _____	Money received or paid on your behalf (e.g. bills, rent, etc) not reported elsewhere on this worksheet
\$ _____	Cash/Savings/Checking
\$ _____	Investment Net Worth (not including your home)
\$ _____	Business and Farm Net Worth

**Sign the Worksheet**

- I certify that all of the information reported to qualify for Federal Student Aid is complete and correct
- All required documents are attached and all tax documents are signed.
- If you purposefully give false/misleading information on this worksheet, you may be fined and/or sentenced to jail

**Student Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**OFFICE USE ONLY**

<b>APPROVED</b>	<b>DENIED</b>		
Comments:			
Advisor Signature:		Date:	
<b>APPROVED</b>	<b>DENIED</b>		
Comments:			
Advisor Signature:		Date:	