CREIGHTON UNIVERSITY APPEAL FOR INDEPENDENT STUDENT STATUS 2021-22

STUDENT NAME	STUDENT NET	Γ ID
PERMANENT ADDRESS		
PHONE ()	EMAIL	@creighton.edu
The US Department of Education defines an independent student as a person who meets any of the following conditions:		
□ was born before January 1, 1998□ is married		
 will be working on a master's or doctorate program (e.g., MA, MBA, I is serving on active duty in the U.S. Armed Forces is a veteran of the U.S. Armed Forces 	MD, JD, PhD, EdD, graduate ce	ertificate)
□ has children and provides more than half of their support □ since age 13, both parents were deceased		
☐ has dependents (other than children or my spouse) who live with m☐ was in foster care since turning age 13	e and provides more than hal	lf of their support
was a dependent or ward of the court since turning age 13is currently or was in legal guardianship		
□ is currently or was an emancipated minor□ is an unaccompanied youth who is homeless or is self-supporting ar	nd at risk of being homeless	
If you do not qualify as independent under the above guidelines, yet feel you are, in fact, "independent," you may appeal to the Creighton University Financial Aid Office. A Financial Aid Administrator may, in some cases, agree that you should be considered independent if exceptional family circumstances exist and are documented. Examples of exceptional family circumstances include abuse, abandonment, broken parent/child relationships, etc. Note that parental refusal to provide support or the choice of a student not to accept parental support are not considered exceptional family circumstances.		
If you feel you have exceptional family circumstances and following documentation to the Creighton University Finan		or independent status, provide the
 A written description of why you consider yo where you have been living and your source(s) of inco parents' tax returns for those same two years. Enclose documentation showing payment of those expenses. Puthat you feel is applicable. 	ome for the past two year copies of one month's b	rs. Provide copies of your oills/expenses and
• Three other supporting letters from individual include foster parent, priest/minister, social worker, coare not acceptable.		
I understand this request is subject to the professional judg I may be asked to provide further documentation to suppor information, I may receive penalties which include a fine a	t this request. I also unde	erstand that if I purposely give false
Signed:	Date:	
Return this form and supporting documentation to:		

CREIGHTON UNIVERSITY OFFICE OF STUDENT FINANCIAL AID HARPER CENTER RM 1100 2500 CALIFORNIA PLAZA OMAHA, NE 68178-0062

https://jaydrop.creighton.edu/filedrop/FinancialAid