

**2024-2025 PROVISIONAL INDEPENDENT FORM  
(Appeal for Dependency Override)**

**STUDENT INFORMATION** (Please Print)

Student's Last Name

Student's First Name

Middle Initial

Student ID Number

**PROVISIONAL INDEPENDENT CONFIRMATION**

Based on the information you have reported on your FAFSA, you have been granted a Provisional Independent status. In order to continue processing your financial aid application, the U.S. Department of Education requires that we verify you meet the requirements for Independent status.

**Step 1: Reason for Appeal**

Please check the option that most accurately describes your circumstances from the below list:

- I was granted Independent status at Milwaukee Area Technical College for the prior academic year.  
**(Skip to Step 4 if your situation has remained unchanged)**
- At any time on or after July 1, 2023, I was unaccompanied and either (1) homeless or (2) self-supporting and at risk of being homeless. **(Must complete the 2024-2025 Unaccompanied Homeless Youth Verification Form)**
- I left home due to an abusive or threatening environment.
- I was abandoned by or am estranged from my parents.
- I have refugee or asylee status and am separated from my parents, or my parents are displaced in a foreign country.
- I am a victim of human trafficking.
- I am incarcerated, or my parents are incarcerated and contact with my parents would pose a risk to me.
- I am otherwise unable to contact or locate my parents.
- None of these circumstances apply

**Step 2: Submit a Signed/Dated Personal Statement**

Include a signed/dated statement that explains in detail the extreme, unique and/or unusual family circumstance(s) that prevents you from obtaining and providing your parents' information for your financial aid application. In the detailed statement please include:

- A history of events with dates
- Explain how these events led to the eventual deterioration/dysfunction in the parent/child relationship between you and your parent(s)
- Describe your current relationship (even if non-existent) with your parent(s)

**Step 3: Submit Supporting Documentation**

Please submit the following documents substantiating and documenting the existence of your unusual circumstance.

- Letter from a professional (counselor, therapist, doctor, member of the clergy, social worker, etc.) or from another person having comprehensive knowledge regarding the existence of your unusual circumstances. They should be knowledgeable about your family situation and can verify the reason you are unable to provide your parents' information. (Make sure the person's name, address and phone number appear on the letter.)
- Any other documentation that supports your reason for appeal. Examples include but not limited to restraining order, police report, medical records, etc.

**Step 4: Read and Sign**

Please note:

- If your appeal is incomplete or submitted without the necessary documentation, processing of your appeal will be delayed until the additional information is obtained.
- Submission of an appeal does not guarantee your request will be approved.
- If approved, the Provisional Independent status will be valid for future years while attending MATC unless you indicate that your situation has changed. Your status will be reassessed each academic year.
- You will be notified by MATC email regarding the outcome of your Provisional Independent status request.
  - If your appeal is accepted, MATC will submit the approval to the Department of Education, and you will receive a FAFSA submission summary reflecting your independent status. An award offer will then be processed and you will be notified via MATC email to view and accept your award in MATC's Self Service.
  - If your appeal is not accepted, the MATC Financial Aid Office will notify you via email.

**CERTIFICATION:**

I certify that the information provided on this form is true and correct. I fully understand that to falsify any information on this form in order to receive Federal Title IV funds is a federal offense and can be punishable by a fine, imprisonment, or both. I understand that if my situation changes in any way, if I move back with my parents or receive any kind of support from them, that I must report this information to the Financial Aid Office.

I understand that by signing this form, I authorize the Financial Aid Office to contact my third-party reference and verify any information supplied on this form.

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Signature

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Date