

UNIVERSITY OF NEW MEXICO  
OFFICE OF STUDENT FINANCIAL AID  
PETITION FOR INDEPENDENT STATUS  
2009–2010

The US Congress and Department of Education determine the criteria for whether a student is considered dependent or independent of their parents for financial aid purposes. Generally, how an applicant responds to Section 2 of the FAFSA determines dependency status.

The questions in “Section 2” are:

1. Were you born before January 1, 1986?
2. As of today, are you married? (Answer yes if you are separated, but not divorced.) “As of today” refers to the day that you sign your FAFSA.
3. At the beginning of the 2009–2010 school year, will you be working on a master’s or doctorate program (such as an MA, MBA, MD, JD, PhD, EdD, or graduate certificate, etc.)?
4. Are you currently serving on active duty in the US Armed Forces for purposes other than training?
5. Are you a veteran of the US Armed Forces?
6. Do you have children who will receive more than half of their support from you between July 1, 2009 and June 30, 2010?
7. Do you have dependents (other than your children or spouse) who live with you and who receive more than half of their support from you, now and through June 30, 2010?
8. At any time since you turned age 13, were both your parents deceased, were you in foster care or were you a dependent or ward of the court?
9. Are you or were you an emancipated minor as determined by a court in your state of legal residence?
10. Are you or were you in legal guardianship as determined by a court in your state of legal residence?
11. At any time on or After July 1, 2008, did your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless?
12. At any time on or after July 1, 2008, did the director of an emergency shelter or transitional housing program funded by the US Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless?
13. At any time on or after July 1, 2008, did the director of a runaway or homeless youth basic center or transitional living program determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless?

If you do not meet one of the above conditions, but feel there are extenuating circumstances which warrant being considered independent of your parents, you may explain those circumstances in this petition.

**The federal government has identified four conditions that, individually or in combination with one another, do not qualify as “extenuating circumstances”, and do not merit a dependency override. Those circumstances are:**

1. Parents refusing to contribute to the student’s education;
2. Parents unwilling to provide information on the application or for verification;
3. Parents not claiming the student as a dependent for income tax purposes; and
4. Student demonstrating total self-sufficiency.

Please submit the documentation listed below with this petition:

- Signed copies of your parents' (or stepparents') 2008 federal income tax returns
- Signed copy of your 2008 federal income tax return
- Documentation of any income or resources received in 2008 that are not on your tax return
- Documentation of where you lived since January, 2008 (e.g., signed lease agreements, housing contract, etc.)

For your petition to be considered, you must not have been claimed as a tax exemption by a parent or stepparent in 2008. Your parent(s)/stepparent(s) may not have used you as the basis to file income taxes as "head of household."

1.

What amount of financial support did you receive from your parents in 2008? \$	What amount of financial support will you receive from your parents in 2009? \$
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2.

What other support do you receive from your parent(s) or stepparent(s)? Examples: health or auto insurance, room and board, clothing, use of a vehicle, etc. Please identify the type of support and its approximate value:	\$
Total	\$

STUDENT'S COMMENTS	

I hereby certify that the information I have submitted is true and correct.

Student Last Name	Student First Name	Student Middle Initial

Student's Printed Name	Student's Signature	UNM ID

<b>E-Mail Address</b>	<b>Telephone No.</b>	<b>Date Signed</b>
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**Send To:**

The University of New Mexico is an Equal Opportunity/Affirmative Action institution. Pursuant to the Americans with Disabilities Act, if you require this information in alternative format or have special needs, please contact the Office of Student Financial Aid for assistance.

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