



Student Full Name	Student BU ID number	Student's Date of Birth (MM/DD/YYYY)
Permanent Address		

Financial aid regulations assume that the family has the primary responsibility for meeting the educational costs of students. If you are considered a dependent student for financial aid purposes, your aid eligibility is determined using parental income and asset information in addition to your income information. Occasionally, due to unusual circumstances, a student may be considered independent for financial aid purposes by meeting certain criteria. Please review the criteria below, noting any that apply to your situation.

- An abusive family environment
- Abandonment by parents
- Incarceration or institutionalization of both parents
- Human Trafficking
- Legally granted refugee or asylum status
- Were you in foster care or ward of the court or does someone have legal guardianship of you
- Were you an emancipated minor
- Did your high school or school district homeless liaison determine that you were an unaccompanied youth that was homeless or risk of being homeless

In your petition, you must address each of the following items:

- Identify the location of both of your parents.
- Describe the contact you have with each parent. Explain: when, where, the nature and the frequency of the contact.
- Explain what unusual circumstances as to why you should be made an independent student. Be as detailed as possible in your explanations.

Describe how you have been self-supporting:

- What month & year did you start meeting your expenses without parental support?
- How have you provided for yourself?
- Copies of the appropriate court documents are acceptable to support your petition.
- Submit copies of your Federal Income Tax Returns and W2 forms from the previous **two** calendar years.
- Provide statements from **two** responsible adults (priest, minister, caseworker, police officer, high school counselor, etc.) who are aware of your family situation. The statements must be from someone who is **not a parent**.

Name	Title	Relationship to student
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All of the information on this form is true and complete to the best of my knowledge. I agree to provide verification of the information I have given on this form.

Student Signature (Required)	Date

Please submit the signed and completed form, along with supporting documentation, to the Office of Financial Aid via our dropbox located on our [website](#) or via email to financialaid@ben.edu