



UNUSUAL CIRCUMSTANCE WORKSHEET

Please release the information requested on this form to Rochester University.

Student Name: _____

Date of Birth: _____

SSN: _____

Please mark designation regarding reason for dependency change:

- Unable to contact parent _____
- Contacting parent would pose a risk to student _____
- Human trafficking _____
- Refugee/Asylum status _____
- Parent incarceration _____
- Parental abandonment or estrangement _____
- Parental abuse or separation _____

Other _____

Please mark one or more describing the documentation you will submit to the Student Financial Services Office:

- A written statement from a third party describing dependency situation _____
- A copy of documentation showing parent is incarcerated _____
- A copy of documentation of a phone call/written statement with authorities confirming separation or abuse from parent _____
- A copy of documented interview between student and Student Financial Services staff _____
- Dependency documentation from another institution _____
- _____

Other _____

Use the following space to provide a detailed description of the unusual circumstances that you feel warrant a reevaluation of your dependency status. You must fill this section out completely or attach a typewritten letter explaining your situation.

CERTIFICATION: I certify the submitted information is true and correct to the best of my knowledge. I have read each section and provided the appropriate required documentation. I realize that if I do not provide supporting documentation within 60 days of request, Rochester University will take no further action on this request.

STUDENT SIGNATURE

DATE