

2026-27 Unusual Circumstance/Independent Appeal

Complete this Form to be considered Independent for Financial Aid

<u>Last Name:</u>	<u>First Name:</u>	<u>Date:</u>
<u>Mailing Address:</u>		<u>Phone Number:</u>
<u>City, State & Zip:</u>		<u>LTCC ID #:</u>

According to your Free Application for Federal Student Aid (FAFSA) or CA Dream Act Application (CADAA), you have chosen not to provide parent(s) information due to an “unusual circumstance”. If it is not good for your health or well-being to engage with your parents, you may complete this appeal process to be considered Independent for FAFSA purposes.

INSTRUCTIONS:

1. Please write a statement below explaining the circumstances between you and your biological or adoptive parents that negatively affect your health or well-being and have forced you to become independent. It is best to write something about each parent. If you don't know where one or both parents are, or if they have never been in your life, you may say that in your statement. If you need more room to write you may attach another sheet for your statement, but it is usually ok to make your statement brief.
2. You must attach a documentation of your circumstances. Examples of acceptable documentation include, but are not limited to:
 - a. Letter, including contact information, from a third-party in a professional capacity (e.g., Therapist, Social Worker, Probation Officer, Supervisor, CASA, Clergy member, etc.),
 - b. Court documents,
 - c. Police reports,
 - d. If you do not have any of the above documents, a letter from a friend or family member may be considered.
3. If you can't or do not want to provide any document, you may schedule an interview with the Director of Financial Aid. You may email follett@ltcc.edu or call/text (530) 314-7857 for an appointment or drop in at the Financial Aid Office at One Stop – Student Services.
4. Submit all documents to the Financial Aid Office by uploading to your [Required Documents page in Student Self Service](#).





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Student Statement:

I am signing to certify that my statement is true and correct to my knowledge.

Signature: _____ Date: _____

Contact Naomi or América at (530) 541-4660 x636 or find us on [CraniumCafe](#) if you have any questions.

