****

**Contact Us:**

**P: (434) 544-8228**

**E:** **financialaid@lynchburg.edu**

[**www.lynchburg.edu**](http://www.lynchburg.edu)

**1501 Lakeside Drive**

**Lynchburg Va 24501**

**2022-23 Third-Party Statement for Request of Independent Student Status**

In extraordinary and documented cases, the Office of Financial Aid has the authority to use professional judgment to override a student’s dependency status to make a student independent for the purpose of applying for federal financial aid. A student must be unable to obtain parent information because of extenuating circumstances.

Federal law allows a student to be reclassified to independent status ONLY in cases with unusual circumstances such as the ***involuntary***dissolution of the family due an abusive home environment that threatens the student’s health or safety, death, imprisonment, abandonment, or the student being unable to locate his/her parents. Neither a parent’s unwillingness to provide the information or inability to help support the student are acceptable reasons for an appeal.

The information the student stated in his/her Request for Independent Student Status must be verified by a third party who is aware of the student’s home situation and can support the student information provided. Examples of third-party sources include a teacher, counselor, medical authority, member of the clergy, attorney, social worker, mental health professional, law enforcement, or an adult with whom the student has lived during the past year. The student has chosen you to provide one of the third-party statements.

Name of Third-Party Reference Title

Name of Business/School/Organization

Address

Telephone Number Email Address

Student’s First and Last Name

Your Relationship to the Student

How long have you known the student?

When was the last time the student was able to live at home with his/her parent(s)?

Please explain what you know about the student’s relationship with his/her parent(s) and why you feel the student’s circumstances warrant an exception to the student’s dependency status:

Signature Date

**Return this Statement to the University of Lynchburg Office of Financial Aid**

Use the secure link at <https://www.lynchburg.edu/undergraduate-admission/financial-aid/forms-and-publications/>