

2023-2024 PETITION TO REQUEST INDEPENDENCY RENEWAL

Student Name

ctcLink Student ID #

I confirm that my situation as specified in my Independence Petition for the _____ academic year remains unchanged and that the information I submitted accurately reflects my present situation. I request that I be granted a waiver from the Federal regulation requiring parental information on the Free Application for Federal Student Aid (FAFSA) again for the 2023-2024 academic year.

I understand that my independency renewal request cannot be processed until I have met with, or have been contacted by, a Financial Aid Administrator to verify that my status remains unchanged.

My daytime contact number is: _____.

I certify that the information provided on this form is true and correct to the best of my knowledge. I understand that false or misleading information may be cause for denial, termination, and/or repayment of financial aid funds.

*I understand that submitting this form electronically as an email attachment **using my SVC email account** constitutes my signature and my certification that the information provided herein is complete and correct.*

Once completed, this form may be submitted via your mySVC email account, to financial.aid@skagit.edu. Note: this email address is for document submission only.

Signature

Date

FOR OFFICE USE ONLY

FA Administrator Decision:

- Circumstances have changed since the original petition was filed. Student is now **dependent**. Parent data is required.
- Student remains **independent** based on professional judgement. Override submitted via CPS.

Financial Aid Staff

Date

Rev. 3/3/23

SVC FINANCIAL AID OFFICE USE ONLY

72B

Request Approved Request Denied Pending

**INITIALS
& DATE:**