`AJ77`:]bUbW]U`5]X`CZZ]WY

4234/4235'F GRGP F GPE['QXGTT IF G''

"		
**		
**		
Student Name		*#M <i>#</i> #:
•		
**		
	Students born <u>after</u> December 31, 1989 who do not meet the federal guidelines as an Independent student, <u>may be considered</u> for special consideration if they can verify that they meet one of the following unusual circumstances:	

"

> "	EKTEWO UVCPEG'TGS WGUVGF''	F QE WO GP VC VKQP "
*"4"	Mci f'dUfYbhg are either deceased, totally and permanently	Death certificates, medical records and/or court papers including
	disabled, or have been declared incompetent by judicial	effective dates.
	action.	
*"4"	Mci have been redered financially independent due to	Court documents verifying involuntary dissolution of your family and
	the involutary disolution of your family reulting in	a statement verifying how you have maintained your self-support.
	relinquishment of your parent's responsibilities.	
*"4"	Mci are currently re ceiving pu blic a ssistance. Public	A curret Budget Shet from the Department of Social Services
	assistance does not include food stam ps, unemployment	verifying your own case number.
	insurance, or AFDC or ADC benefits.	
*"4"	CH Yf.	Your d etailed explanation of your situtation a well as two forms of
	Your High School, or school district liaison determined that	documentation which verify your extraordinary circumstances.
	you we're an una ccompanied youth who was homless;	Documentation will be acepted from the following: attorney, social
	CF the direct or of an emegency Ash elter determined you	worker, guid ance co unselor, clegy or other professional. The
	were homeless; CF the director of a runa way center, or	documentation must be on their letterhead.
	transitional living program determined you were homeless.	
	- · · · · · · · · · · · · · · · · · · ·	

Student's Signature

Date Signed