

Request to Continue Unusual Circumstances

Transforming lives through excellence in teaching & learning

STUDENT SERVICES - FINANCIAL AID

Student's Name:		ctcLink ID:		
aid as an independent stu Please include informatio	udent again for the n such as the location of bo	umstance. I feel I should be allowed year due to the folloth your parents, the last time you ha	owing reasons.	
(when, where, and nature have been self-supporting		cannot obtain parental information, a	nd describe how you	
	·	FAFSA or WASFA for the year you are red on provided is true and correct.	questing independency.	
Signature:		Date:	Date:	
Return completed form to faic	dinfo@bigbend.edu, 1.888.820.7	2896, or via US mail: 7662 Chanute St. NE, N	loses Lake, WA 98837.	
	OFFIC	CE USE ONLY		
Approved	Denied	Dependency Status O	verride	

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