SOUTHWESTERN ADVENTIST UNIVERSITY
OFFICE OF STUDENT FINANCIAL SERVICES

PETITION FOR INDEPENDENT STATUS REFERENCE

2025-2026

PII PERSONALLY IDENTIFIABLE INFORMATION

1. Name of Applicant: _____
2. With whom does the applicant reside? _____
3. If you have knowledge that someone claimed the applicant as an income tax exemption in 2023, please provide their name and relationship to the applicant. _____
4. This student is claiming to be independent of his/her parents: Please explain what you know about this student's relationship to his/her parents, and how the student has supported him/herself. If you should need more space to explain attach a letter or use the back of this form.

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I certify that the information on this form is true and complete to the best of my knowledge. I understand I may be contacted if further information is needed.

Name of Reference (Please print) _____

Relationship to Applicant _____

Signature _____ Date _____

Address _____ City/State/Zip Code _____

Phone _____ Best time to be reached _____

Please return completed form to
SOUTHWESTERN ADVENTIST UNIVERSITY
Student Financial Services

100 W. Hillcrest Street • Keene, TX 76059 • phone (817) 202-6262 • sfs@swau.edu