

| Student Name: | | | | |
|----------------------------|--|--|-------|------------------|
| | | | SF En | F Email Address: |
| 1. 2. 3. 4. 5. | Determined that you do not qualical College, and Demonstrated a well-founded feademonstration that you have sufficient discrimination, harassment, intimes ubstantial nexus to your current A financial hardship, as demonstrator, if unable to complete it due to Submitted final, official transcript status as a transfer student. Il previous colleges/universities you | elected a degree or credential-seeking program of study, and fy for Florida residency for tuition purposes at Santa Fe ar of persecution on the basis of religion, as established by the fered, are currently suffering, or credibly fear suffering future idation, or violence, either at your current institution or with a institution, on the basis of religion, and ated by the FAFSA standardized calculation, either on the FAFSA citizenship status, on the FAFSA Alternative provided by SF. s from all other colleges/universities attended to demonstrate have attended: [persecution on the basis of religion, as explained in #2, above.] | | |
| pleas an ex recor | e include as attachments any evider panded personal statement; statem | student.affairs@sfcollege.edu. When submitting this application, nce that supports your statement above. This evidence could be nents from witnesses; recordings or photographs; official procement or your current college or university; and any other te to your claim. | | |
| By sig corre | | rmation provided herein and as attachments are true and | | |
| Stude | ent Signature | Date | | |