



**ICC-Financial Assistance Office**

1 College Drive  
East Peoria, IL 61635-0001

Phone: (309) 694-5600  
Fax: (309) 694-5160  
email: [financialaid@icc.edu](mailto:financialaid@icc.edu)

**2023-2024 UNUSUAL CIRCUMSTANCE  
WITNESS STATEMENT**

Student Name: \_\_\_\_\_ ICC Student ID: \_\_\_\_\_

In the process of determining the above-named student's dependency status, we have asked the student to submit witness statements that can attest to the student's living arrangements and financial support. We are asking that you write a paragraph, on the student's behalf, confirming their status and return this statement to our office.

Thank you,

Financial Assistance Office  
Illinois Central College

\*I am familiar with the above student's living arrangements and financial support. I affirm the information is true and correct to the best of my knowledge. I agree to respond to inquiries concerning this student's status.

\_\_\_\_\_  
Printed Name of Witness

\_\_\_\_\_  
Phone

\_\_\_\_\_  
Job Title

\_\_\_\_\_  
Relationship to Student

\_\_\_\_\_  
Signature of Witness

\_\_\_\_\_  
Date