

## Dependency Override Request Form

\_\_\_\_\_  
Student First Name                      M.I.                      Last Name                      991-\_\_\_\_\_  
ID Number

I am submitting this request and the required documentation to initiate a review of my dependency status. I am aware that some student's financial aid dependency classification may occasionally be changed due specifically to circumstances like abusive family situations, release into court custody for their protection, current parental incarceration, or complete parental abandonment. I understand that an appeal for reclassification to independent student status is usually only granted on the basis of a complete irreparable breakdown of a family relationship due to more than personal choice. I also understand that I will be selected for verification and must provide my current year federal income tax return.

### Section I

I understand that the factors below **do not** make a student eligible for a dependency override:

- Parental unwillingness to give information or financial help to the student
- Whether or not the parents claim the student on their federal tax return
- Whether or not the student lives with the parent
- Whether or not the student pays all their own expenses

### Section II

\_\_\_\_\_ Check here if this is your **first appeal** and provide the items listed below. Also attach any supporting documents listed in Section IV on page 2.

- Submit **this form** signed and dated.
- A very detailed signed letter from you explaining your family relationship and the circumstances causing the irreparable family structure breakdown.
- **At least two detailed signed letters from other parties** explaining the family situation and giving supporting justification for such a drastic change. These can be from an adult relative, a professional not related to you like a teacher, counselor, minister or official. Use of letterhead is encouraged.
- A completed paper FAFSA (Go to [http://federalstudentaid.ed.gov/fafsa/fafsa\\_options.html](http://federalstudentaid.ed.gov/fafsa/fafsa_options.html) to access the FAFSA. Click on FAFSA (Black and White) pdf English version to print the FAFSA.
- A completed Independent Verification Worksheet. (This form is on the Financial Aid Website).
- A copy of your current year federal income tax return.

**Section III**

\_\_\_\_\_ Check here if this is your **subsequent appeal** and provide the items listed below. Also attach any supporting documents listed in Section IV.

- Submit **this form** signed and dated.
- **A very detailed signed letter from you** reaffirming your family relationship and the circumstances causing the irreparable family structure breakdown.
- **One detailed signed letter from another party** reaffirming the family situation and giving supporting justification for such a drastic change. These can be from an adult relative, a professional not related to you like a teacher, counselor, minister or official. Use of letterhead is encouraged.
- A completed paper FAFSA (Go to [http://federalstudentaid.ed.gov/fafsa/fafsa\\_options.html](http://federalstudentaid.ed.gov/fafsa/fafsa_options.html) to access the FAFSA. Click on FAFSA (Black and White) pdf English version to print the FAFSA.
- A completed Independent Verification Worksheet. (This form is on the Financial Aid Website).
- A copy of your current year federal income tax return.

**Special Note:** If you reference supporting documentation submitted with a prior appeal and the information is no longer valid, you will be notified to provide updated information.

**Section IV**

Additional supporting information may include the following:

- Copies of any official documents that support the claim request. Such items could include court documents, death certificates or police reports, or other official records.
- Any other documents that can help to clearly define the justification for a dependency override.

**Special Note:** If your appeal is **denied**, you will be required to include parental information on the FAFSA, complete a Dependent Verification Worksheet, and submit signed copies of your and your parents Federal Income Tax Return for the current tax year.

**Section V**

**Certification and Signature**

I understand decisions by your office are final, so I need to be complete in my explanation and supporting materials. I will be notified once my request has been reviewed. If my appeal is granted, my financial aid dependency status will be updated with the government. The Office of Student Financial Aid will adjust my financial aid after receiving confirmation back from the government about the changes submitted.

I understand the requirements outlined above and certify that all the information submitted is complete and correct.

\_\_\_\_\_  
Student Signature (*required*)

\_\_\_\_\_  
Date