



2009-2010 Request for Dependency Override

Name: _____

SSN or ID: _____

It is the primary responsibility of the family to pay for a student's education. Federal financial aid is intended to supplement the amount that the family pays, based on the family's financial circumstance. A student who simply moves away from home and is self-supporting must provide parental income when applying for financial aid. They are NOT independent students for financial aid purposes, considered in determining financial need, but, in instances of unusual circumstances such as abuse in the home, neglect, abandonment, etc., the Financial Aid Office can determine if a student should be considered independent.

- Were you born before January 1, 1986? Yes___ No___
- As of today, are you married? (Also answer "Yes" if you are separated but not divorced.) Yes___ No___
- At the beginning of the 2009-2010 school year, will you be working on a master's or doctorate program (such as an MA, MBA, MD, JD, PhD, EdD, or graduate certificate, etc.)? Yes___ No___
- Are you currently serving on active duty in the U.S. Armed Forces for purposes other than training? Yes___ No___
- Are you a veteran of the U.S. Armed Forces? Yes___ No___
- Do you have children who will receive more than half of their support from you between July 1, 2009 and June 30, 2010? Yes___ No___
- Do you have dependents (other than your children or spouse) who live with you and who receive more than half of their support from you, now and through June 30, 2010? Yes___ No___
- At any time since you turned age 13, were both of your parents deceased, were you in foster care or were you a dependent or ward of the court? Yes___ No___
- Are you or were you an emancipated minor as determined by a court in your state of legal residence? Yes___ No___
- Are you or were you in legal guardianship as determined by a court in your state of legal residence? Yes___ No___
- At any time on or after July 1, 2008, did your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless? Yes___ No___
- At any time on or after July 1, 2008, did the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless? Yes___ No___
- At any time on or after July 1, 2008, did the director of a runaway or homeless youth basic center or transitional living program determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless? Yes___ No___

1) A personal letter of appeal explaining the reason for your request for a dependency override.

The letter should provide as much detail as possible describing your separation from your parents. You are required to include the following documentation:

- The whereabouts of your biological parents and their current living arrangements. Include the last contact you had with your biological parents and the frequency of Contact with them over the past year(s).
- Why you cannot provide parental information on the 2009-2010 Free Application for Federal Student Aid (FAFSA).
- Your living arrangements over the past year(s). With whom you have lived with and who has provided financial support for you.
- Your name, and signature.

2) Letters from three individuals who can attest to your situation.

Their letters should be one to two pages and provide as much detail as possible describing your separation from your parents.

- The first letter should be from a professional individual not related to the student --- counselor, social worker, teacher, clergy, police, etc.
- The second letter should be from either a professional or non-professional individual.
- The third letter can be from a family member. Each letter must include the individual's name, title or position, address, phone number, and must be signed.
- The individuals cannot be related to each other AND must reside at separate addresses.

3) A completed and signed 2009-2010 FAFSA --- leave the parent section blank.

4) A signed and dated copy of the student's 2008 Federal Income Tax Return or copies of W2s/1099s if you did not fill out a tax return.

5) Please complete the following information.

Did anyone claim you on their 2008 Federal Income Tax Return?

NO

YES Person's Name: _____ Relationship to you: _____

Did you receive AFDC/TANF (welfare), SSI (disability), or Social Security checks in 2008?

NO

YES List the name(s) of the source, how much you received PER MONTH, and the number of months you received the benefit in 2008.

Provide the following information (you may be asked to provide documentation) about your expenses PER MONTH in 2008 and 2009. If any amounts are zero, explain the reason.

Expenses	2008	Support provided by:	2009 Estimate	Support provided by:
Housing (rent, mortgage)	_____	_____	_____	_____
Child Care	_____	_____	_____	_____
Food	_____	_____	_____	_____
Utilities	_____	_____	_____	_____
Credit Card(s)	_____	_____	_____	_____
Medical/Dental	_____	_____	_____	_____
Clothing	_____	_____	_____	_____
Auto (car payments, insurance, and maintenance)	_____	_____	_____	_____
Tuition, Fees, Books, and Supplies	_____	_____	_____	_____
Other Expenses	_____	_____	_____	_____
Total MONTHLY Expenses	_____	_____	_____	_____
Total YEARLY Expenses	_____	_____	_____	_____

I certify that all of the information listed on the form concerning my request for a dependency override is correct and complete.

Signature

Date

FOR OFFICE USE ONLY

DATE: _____

APPROVED

DENIED

DIRECTOR'S SIGNATURE: _____