A "Dependent Student" is required to supply parental information on the Free Application for Federal Student Aid (FAFSA) when applying for federal aid. The Department of Education defines a "Dependent Student" as a student who:

- was born after January 1, 1996; and
- is not married as of the date you filed your FAFSA; or
- is not currently working on a master's or doctorate program; or
- is not a veteran of the U. S. armed forces; or
- is not currently serving on active duty in the US armed forces for purposes other than training; or
- is not an orphan or a ward of the court; or
- is not in legal guardianship, an emancipated minor or an unaccompanied youth who is homeless (determined by your high school, school district, emergency shelter, transitional housing program, runaway or homeless youth basic center); or
- does not have children and/or legal dependents for whom he/she provides more than half of their support.

The Office of Financial Aid may adjust a student's dependency status from "dependent" to "independent" when extenuating circumstances exist that are beyond the control of the student and make parental support impossible.

Parental refusal of support is **NOT** enough to qualify for a dependency override. To be considered for a dependency override, the student and parents must have severed their relationship due to extraordinary circumstances, (e.g., abuse, neglect, or irreconcilable differences).

**Please provide the following information to apply for a Dependency Status Override from the Office of Financial Aid.**

1. **Personal Statement:** On a separate piece of paper, tell us, in your own words, why you should be considered an independent student. Explain in detail the circumstance leading to your independence from your family and your current situation.

2. **Two Professional Statements:** Provide two letters, on official letterhead, from professional adults verifying the events leading to your separation from your parent's household and your current situation. Professional adults include clergy members, guidance counselors, teachers, professors, doctors, family counselors, mental health professionals and law enforcement officers.

3. **Personal Support Statement:** On a separate piece of paper, please describe how you have supported yourself in the past and how you plan to continue supporting yourself in the future. Please detail your average monthly expenses and how they are covered. If you are receiving support from friends or relatives, you must include this information in your statement.

_I hereby certify that all the information in this appeal is true and complete to the best of my knowledge. I understand that failure to provide the above listed documentation will result in a denial, and that an appeal does not mean an override of my dependency status will be approved. Students will be notified of a decision via phone and/or an updated award letter. Decisions may not be appealed._

Signature: __________________________________________________________ Date: ___________________