

DEPENDENCY OVERRIDE REQUEST FORM 2009-2010

Name: _____ W#: _____

Federal law assumes that the family has the primary responsibility for meeting the educational cost of students. Therefore, a student must meet certain federal criteria to qualify for financial aid as an independent student. If you do not meet one of the criteria listed on the FAFSA, you will be evaluated as a dependent student, meaning that your parents must provide income and asset information. If there are extraordinary circumstances that may warrant reevaluation of your dependency status, provide the following information so that your financial aid administrator may make this determination. You may be asked for additional documentation depending on your individual situation.

Attach the following information to this form:

- A. Letter from you explaining: (1) the nature of your relationship with your parents; (2) the location of both parents and when you last had contact with them; (3) why you cannot obtain information and/or support from your parents; and (4) how you have been supporting yourself.
- B. Statement from a responsible adult who is aware of your situation and can verify the facts you present in your letter.
- C. Copies of your most recent two federal tax returns (2007 & 2008)
 - 1. Are you living at home with your parents? YES NO
 - 2. Did your parents claim you in their federal tax return for 2008? YES NO
 - 3. Will your parents claim you in their federal tax return for 2009? YES NO

Please complete the following statement of your annual calendar year income and expenses:

INCOME (If any amounts are zero, please explain on a separate sheet.)	2008	2009
Earned income (e.g., wages, salaries, tips, work-study earnings)	\$	\$
Financial support received from parents	\$	\$
Monetary value of other support (e.g., health insurance, room & board) received from parents	\$	\$
Monetary value of other support (e.g., room & board) from persons other than parents (indicate source)	\$	\$
Amount of other annual income (indicate source)	\$	\$
TOTAL	\$	\$
EXPENSES (If any amounts are zero, please explain on a separate sheet.)	2008	2009
Housing	\$	\$
Food	\$	\$
Transportation (e.g., car payment, insurance, gas, maintenance)	\$	\$
Utilities	\$	\$
Child care and/or dependent care	\$	\$
Personal (e.g., clothing, entertainment)	\$	\$
Other (indicate source)	\$	\$
TOTAL	\$	\$

(Other documents needed to support request: rent/lease agreements, rent receipts, utility receipts, and any other documents to support self-sufficiency.)

I certify that the information above is true and complete to the best of my knowledge. I agree to give proof of the information that I have given above. I also realize that if I do not give such proof, my request will be denied, and parental data will be used for my aid application.

Student's Signature _____ Date _____

DO NOT WRITE BELOW THIS LINE

ACTION: DENIED APPROVED FAA INITIALS _____ DATE _____

COMMENTS: _____