## Dependency Override Request Form 2025-2026



## Please TYPE Responses

Student Name:			Phone Number:			
Student ID:			Personal Email:			
students. If exception by completing this folisted in the title hear To evaluate your final and upload it to you	nal circu rm. <b>If a ding).</b> A ncial ai r <u>Finan</u> support	s a mandatory part of the Free Appumstances prevent you from providi pproved, you will be considered and new application must be submitted deligibility, ensure that you complecial Aid Student Portal. For more sting documentation will not be provided the consideration will not be provided th	ing this information independent study in the study in the study in the subsequete the form in its information, visit	n, you may seek a udent for the curre uent year you wish entirety, attach all	Dependency Override ent academic year (as to obtain an override. required documents,	
The following circum	stances	may merit a Dependency Override	. Check the appro	priate boxes below	I.	
	Item	Circumstance	Parent 1	Parent 2	]	
	1	Parent is Deceased			1	
	2	Parent is Incarcerated			1	
	3	Unusual Parental Circumstance			1	
	4	Abusive Family Environment (physical, sexual, or mental)				
The following condit	ions, in	dividually or in combination, do No	OT merit a depen	dency override:		
<ol> <li>Parents' unw</li> <li>Parents do ne</li> </ol>	illingne ot claim lity to c	ontribute to your education.  ses to provide information on the FA  n you as a dependent for income tax demonstrate total self-sufficiency. your parent(s).		n.		
STEP 2: REQUIRED D		ENTATION entation based on the unusual circu	umstance selected	d:		
		<b>d</b> : copy of the parent's death certifi <b>ated</b> : documentation that verifies th		erated and lists the	eir anticipated release	
☐ Unusual first-han parents a police, et	d know ind/or t c.). Sta	al Circumstance: attach detailed starledge of your unique circumstance; heir whereabouts (i.e., therapist, so tements should be signed in ink an email address, etc.).	es and can attest chool counselor, so	to your relationsh ocial worker, clergy	ip with <b>BOTH</b> of your members, employer,	

**NOTE:** If you do not have legal documentation and are unable to obtain professional references, please clearly address the circumstances in your personal statement as to why there is no supporting documentation.

☐ **Other**: any other legal documentation to support your claims.



## **STEP 3: STUDENT'S PERSONAL STATEMENT**

Student Signature: \_\_\_\_\_

Please provide a detailed description of your relationship with both of your parents (biological or adoptive) and explain why you are unable to include their information on your FAFSA. Include the following details:

- 1. The last time you had contact with each parent (when, where, and the nature of the contact).
- 2. Where and with whom you have been living over the past year.
- 3. The reasons why you cannot provide parental information, if applicable.

SIGNATURE & CERTI	ation reported	on this form is	accurate and a	omplote and all re
igning below certifies				uest is denied, the s

Date: \_\_\_\_\_