



## 2021-2022 Dependency Override Request Form

*Serving Richmond and Scotland Counties*

Eligibility for assistance is based on the assumption that students and their parents are primarily responsible for paying for one's education. If the directions on your financial aid application instruct you to provide parents' information, then for financial aid purposes, you are dependent on your parents. (Parents are biological or adoptive parents.)

In extreme hardship cases, the Financial Aid Office may be able to assist a student who is technically dependent, but who does not or cannot have contact with his/her biological or adoptive parents. This will apply to situations where the student's physical or emotional welfare is jeopardized by contact with the parents. In such cases, the student must complete this form **AND** provide written statements from a third party professional such as a minister, psychologist, social worker, school counselor, etc. If the student lives alone, he/she must also provide documentation such as tax returns, lease agreements, and/or utility statements, etc. to demonstrate ability to support oneself. Additional documentation may be requested if warranted by the situation.

**Please note: Students will not be considered independent for financial aid purposes if the sole reason is that the student is attempting to prove self-sufficiency; the parent(s) refuse to provide financial information on the financial aid application; parent(s) refuse to contribute to the student's education; or parent(s) do not claim student as a dependent for income tax purposes.**

Student Name: \_\_\_\_\_ SSN: \_\_\_\_\_  
Last First Middle

Address \_\_\_\_\_  
P O Box, Route, or Street City State Zip

Telephone: \_\_\_\_\_ E-mail: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

**Parents Information: Do Not Leave Blank.**

**Mother**  
Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone No. \_\_\_\_\_

( ) Unknown

**Father**  
Name \_\_\_\_\_

Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip \_\_\_\_\_

Phone No. \_\_\_\_\_

( ) Unknown

**Please read carefully and check the one that applies to you. Provide the Financial Aid Office with the requested information. Incomplete applications for dependency status changes will not be evaluated.**

\_\_\_\_\_ **Severe circumstances exist within your family, such as, but not limited to:**

- a. Abusive home situation which is detrimental to you physical or mental well-being.
- b. Incarceration of the custodial parent.
- c. Abandonment by both parents.
- d. History of parental alcohol or drug abuse.

**Supporting documentation required:** Signed statement from adult professional who is not your family member which verifies your family circumstances. Adult professionals include clergy members, attorneys, school counselors, medical doctors, mental health professionals, teachers or professors, law enforcement officers, professional staff of Child and Family Services (Public Assistance Dept.) and officers of the court. Letter must be signed on original letterhead with the professional's title (Counselor, Attorney, Doctor, etc.). Attach signed copy of student's 2019 IRS tax return transcript(s)-not photocopies of the income tax return. To obtain an IRS tax return transcript go to [www.irs.gov](http://www.irs.gov) and click on the "Get Your Record" link, or call 1-800-829-1040. Make sure you order the "IRS tax return transcript" and not the "IRS tax account transcript". You will need your Social Security Number, date of birth, and the address on file with the IRS (normally this will be the address used when your 2019 IRS tax return was filed). It takes up to two weeks for IRS income information to be available for electronic IRS tax return filers, and up to eight weeks for paper IRS tax return filers. If you are married and you and your spouse filed separate 2019 tax returns, you must submit tax return transcripts for both you and your spouse.

\_\_\_\_\_ **Death of a parent after filing the FAFSA and the surviving parent meets one of the severe circumstances listed above.**

**Supporting documentation required:** Signed statement from adult professional who is not your family member which verifies your family circumstances. Adult professionals include clergy members, attorneys, school counselors, medical doctors, mental health professionals, teachers or professors, law enforcement officers, professional staff of Child and Family Services (Public Assistance Dept.) and officers of the court. Letter must be signed on original letterhead with the professional's title (Counselor, Attorney, Doctor, etc.). Attach a photocopy of your parent's death certificate or newspaper obituary. If your last name is different from your parents', please provide legal documentation of birth, adoption, marriage, divorce, or other circumstances, which prove your relationship. Attach signed copy of student's 2019 IRS tax return transcript(s)-not photocopies of the income tax return. To obtain an IRS tax return transcript go to [www.irs.gov](http://www.irs.gov) and click on the "Get Your Record" link, or call 1-800-829-1040. Make sure you order the "IRS tax return transcript" and not the "IRS tax account transcript". You will need your Social Security Number, date of birth, and the address on file with the IRS (normally this will be the address used when your 2019 IRS tax return was filed). It takes up to two weeks for IRS income information to be available for electronic IRS tax return filers, and up to eight weeks for paper IRS tax return filers. If you are married and you and your spouse filed separate 2019 tax returns, you must submit tax return transcripts for both you and your spouse.

\_\_\_\_\_ **You are now divorced after being married and maintaining a residence apart from your parents and your former spouse's parents during the time you were married. You now maintain a separate residence from your parents and pay all expenses from your own income and assets.**

**Supporting documentation required:** Complete copies of your marriage license, divorce decree, federal tax forms (Form 1040) and mortgage or rental agreements for the period in which you were married. Attach signed copy of student's 2019 IRS tax return transcript(s)-not photocopies of the income tax return. To obtain an IRS tax return transcript go to [www.irs.gov](http://www.irs.gov) and click on the "Get Your Record" link, or call 1-800-829-1040. Make sure you order the "IRS tax return transcript" and not the "IRS tax account transcript". You will need your Social Security Number, date of birth, and the address on file with the IRS (normally this will be the address used when your 2019 IRS tax return was filed). It takes up to two weeks for IRS income information to be available for electronic IRS tax return filers, and up to eight weeks for paper IRS tax return filers. If you are married and you and your spouse filed separate 2019 tax returns, you must submit tax return transcripts for both you and your spouse.

1. What are your present living arrangements? With whom do you live? How much rent do you pay each month? How long has this arrangement been going on?

2. How do you support yourself and meet your living expenses?

- |                                                                                                                                                                                                             | <b>Mother</b><br>(Provide Month/Year or write <u>Never</u> ) | <b>Father</b><br>(Provide Month/Year or write <u>Never</u> ) |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------|--------------------------------------------------------------|
| 3. When was the last time you lived with your parents?                                                                                                                                                      | _____                                                        | _____                                                        |
|                                                                                                                                                                                                             | Month/Year                                                   | Month/Year                                                   |
| 4. When was the last time you had any contact with your parents?                                                                                                                                            | _____                                                        | _____                                                        |
|                                                                                                                                                                                                             | Month/Year                                                   | Month/Year                                                   |
| 5. When did your parents last provide any form of support?                                                                                                                                                  | _____                                                        | _____                                                        |
|                                                                                                                                                                                                             | Month/Year                                                   | Month/Year                                                   |
| 6. Please explain in detail the reason(s) you should be considered independent. Be sure to include an explanation of why you cannot or should not have contact with your parent(s). This must be completed. |                                                              |                                                              |

\*\*\*Please attach additional pages if necessary to provide more information that you feel supports your request.\*\*\*

**7. Supporting documentation must be attached.** The above information must be verified and documented in writing by a third party professional who is aware of your situation and who can corroborate the facts you present. The third party must not be a relative. Examples of such persons would include clergy, social workers or other social service personnel, court officials, teachers, counselors, and police officers. *Your request is NOT complete until you turn in this form to the Financial Aid Office with a written statement from an acceptable third party. If you have any questions as to acceptable documentation, please contact us.*

### Certification and Signature

If you are the student, by signing this application you certify that you

- (1) will use federal and /or state student financial aid only to pay the cost of attending an institution of higher education,
- (2) are not in default on a federal student loan or have made satisfactory arrangements to repay it,
- (3) do not owe money back on a federal student grant or have made satisfactory arrangements to repay it,
- (4) will notify your college if you default on a federal student loan and
- (5) will not receive a Federal Pell Grant for more than one college for the same period of time.

If you are the parent or the student, by signing this application you certify that all of the information you provided is true and complete to the best of your knowledge and you agree, if asked, to provide information that will verify the accuracy of your completed form. This information may include U.S. or state income tax forms that you filed or are required to file.

You also certify that you understand that **the Secretary of Education has the authority to verify information reported on this application with the Internal Revenue Service and other federal agencies.**

If you electronically sign any document related to the federal student aid programs using an FSA ID (username and password) and/or any other credential, you certify that you are the person identified by the username and password, and/or any other credential and have not disclosed that username and password, and/or any other credential to anyone else. If you purposely give false or misleading information, you may be fined \$20,000, sent to prison, or both.

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Student's Signature (Required)

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Date

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### For Office Use Only

\_\_\_\_\_ Dependency Override Approved

\_\_\_\_\_ Dependency Override Denied

List Reason Below in Blank Area.

- Adverse home environment
- Support by adult relative \_\_\_\_\_
- Incarcerated parent
- Applicant supports parent(s)
- Other; requires Director's approval

Certification: I hereby use my professional judgment based on the information and documentation provided.

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Director of Financial Aid

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Date