This form is used to re-evaluate your dependency status for 2019-2020 financial aid. We will act on your request only after receiving supporting documentation which confirms your circumstance. Please be aware that submission of this appeal form does not guarantee a favorable change in your dependency.

Check ONE of the following circumstances. Please note that you must provide all supporting documentation requested.

□ Your custodial parent has died and the other natural parent is still living - however, you have had no contact or support from the living parent for a significant period of time.
  - Statement from the student explaining the situation
  - Official letter from an unbiased third party (i.e. a counselor, a member of the clergy, or a member of law enforcement) stating a full explanation of your claim
  - Copy of the death certificate for the deceased parent

□ Extraordinary family circumstances - the circumstances may be a result of abandonment or where the student's welfare would be placed in jeopardy if contact is continued.
  - Statement from the student explaining the situation
  - Official letter from an unbiased third party (i.e. a counselor, a member of the clergy, or a member of law enforcement) stating a full explanation of your claim
  - One or more of the following:
    - A letter from someone other than a relative or a friend
    - Police Reports
    - Court Documents
    - Documentation from a social agency

□ Other unusual circumstances
  - Statement from the student explaining the situation
  - Official letter from an unbiased third party (i.e. a counselor, a member of the clergy, or a member of law enforcement) stating a full explanation of your claim
  - Other documentation that supports your claim

NOTE: The following individual situations are not acceptable reasons for a dependency override.
1. Student is no longer living at home.
2. Student is living at home (or with relatives) but is paying rent.
3. Student has ongoing arguments with parents and due to this, the parents have refused to help.
4. Student has elected to put him/herself through college.
5. Parents have chosen to not provide financial information for the FAFSA OR provide help with the student’s college expenses.

Student Signature: _____________________________ Date: ____________