

2009-2010 DEPENDENCY OVERRIDE

Student Name _____

SS # _____

Students born after December 31, 1985 who do not meet the federal guidelines as an Independent student may be considered for special consideration if they can verify that they meet one of the following unusual circumstances:

✓	CIRCUMSTANCE	REQUESTED DOCUMENTATION
()	Your parents are either deceased, totally and permanently disabled, or have been declared incompetent by judicial action.	Death certificates, medical records and/or court papers including effective dates.
()	You have been rendered financially independent due to the involuntary dissolution of your family resulting in relinquishment of your parent's responsibilities.	Court documents verifying involuntary dissolution of your family and a statement verifying how you have maintained your self-support.
()	You are currently receiving public assistance. Public assistance does not include food stamps, unemployment insurance, or AFDC or ADC benefits.	A current Budget Sheet from the Department of Social Services verifying your <u>own</u> case number.
()	<u>Other:</u> Your High School, or school district liaison determined that you were an unaccompanied youth who was homeless; OR the director of an emergency shelter determined you were homeless; OR the director of a runaway center, or transitional living program determined you were homeless.	Your detailed explanation of your situation as well as two forms of documentation which verify your extraordinary circumstances. Documentation will be accepted from the following: attorney, social worker, guidance counselor, clergy or other professional. The documentation must be on their letterhead.

ALL REQUESTS FOR DEPENDENCY OVERRIDES WILL BE REVIEWED ON A CASE-BY-CASE BASIS TAKING INTO ACCOUNT INFORMATION PROVIDED WITH THIS FORM. STUDENTS WILL BE NOTIFIED BY THE FINANCIAL AID OFFICE OF THEIR DECISION.

STUDENT SIGNATURE _____ DATE _____

For Office Use Only

Date Rec'd _____ Approved YES NO Date _____ By _____