

## **Application for Independent Student Status**

When you apply for federal student aid, your answers to certain questions will determine whether you are considered a dependent of you parent(s) or independent. Students are classified as dependent or independent because federal student aid programs are based on the idea that students, and their parent(s) or spouse, have the primary responsibility for paying for their post-secondary education.

You are automatically considered an independent student if one of the following applies to you when you submit your Free Application for Federal Student Aid (FAFSA):

- You were 24 years-old as of January 1 of this year
- You are married.
- You are enrolled in a graduate or professional program beyond a bachelor's degree.
- You have a child who receives more than half of his or her support from you.
- You are an orphan or have or have had a legal guardian.
- You are or were (until age 18) a ward/dependent of the court.
- You are a veteran of the U. S. Armed Forces.

The federal government allows a financial aid administrator to make dependency overrides on a case-by-case basis for students with unusual circumstances. If the administrator judges that an override is appropriate, he/she must document the unusual circumstances. However, none of the conditions listed below, singly or in combination, qualify as unusual circumstances or merit a dependency override:

- 1) Parents refuse to contribute to the student's education.
- 2) Parents are unwilling to provide information on the application or for verification.
- 3) Parents do not claim the student as a dependent for income tax purposes.
- 4) Student demonstrates total self-sufficiency.

Unusual circumstances do include an abusive family environment or abandonment by parents and may cause any of the above conditions. In such cases a dependency override might be warranted. If you believe you have experienced such unusual circumstances, then you are encouraged to complete this application for a dependency override.

Please provide all information requested by this form together with documentation you feel supports your application. By providing all information at the onset, a decision can be made in a timely manner. In some situations, additional documentation may be requested causing your application to be delayed until that information is provided. All information will remain strictly confidential.

You are asked to provide the following documents with this application.

- 1) Completed Application for Independent Status (back side of this form) and the Verification Worksheet.
- 2) Completed FAFSA, filled out as if you are an independent student.
- 3) Copy of your signed federal tax return for the past year.
- 4) Signed and dated letters explaining your family situation from each of the following.
  - a. You, the student.
  - b. A professional (on letterhead), i.e., a counselor, minister, doctor, lawyer, etc.
  - c. Another adult reference.
- 5) Supporting court documents.

Student Information: (Please Print)

()	
Name:	Student ID Number:
Address:	Date of Birth:
	Marital Status:

## **Parental Information:** Mother's Marital Status (Check One Only) Father's Marital Status (Check One Only) ■ Married ■ Married ☐ Separated ☐ Separated ■ Divorced ■ Divorced ■ Remarried ☐ Remarried ☐ Widowed □ Widowed ☐ Unknown ☐ Unknown □ Deceased Deceased Last year you lived with a parent: (Month/Year) Are you covered by someone else's health insurance plans? (Check One Only) ☐ Yes □ No If no, what is you annual health insurance cost? Who pays for your health insurance? Do you have an automobile? ☐ Yes ☐ No If yes, who makes the car payment? \_\_\_\_\_ Are you covered under someone else's automobile insurance policy? ☐ Yes □ No If no, what is your annual auto insurance cost? Who pays for your automobile insurance? Does anyone assist you in paying for your rent and/or utilities? ☐ Yes ☐ No If yes, how much of your rent and utilities are paid by someone else? What is your total monthly rent and utilities? You will be notified as to the outcome of the Financial Aid Administrator's decision on your FOR OFFICE USE ONLY application by letter. ☐ Approved ☐ Denied By signing below, you certify that you understand the Financial Aid Administrator's decision is final for the current academic year. Date: \_\_\_\_\_

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

FAA: \_\_\_\_\_