



ALLEN UNIVERSITY
OFFICE OF STUDENT FINANCIAL AID
2017-2018
Dependency Override Request

 Student Social Security Number/ ID

 Student Last Name

 Student First Name

In exceptional or extraordinary cases, the Office of Financial Aid may consider overriding a student's dependency status. This allows a student who is normally considered dependent to apply for financial aid without providing parental information on the financial aid application. **A Parents refusal to assist or provide information for the purposes of financial aid is not considered an extraordinary circumstance and therefore does not warrant approval of a dependency override.**

Student Current Address:

Father (if known)

Mother (if known)

 Name

 Name

 Name

 Address

 Address

 Address

 City State Zip

 City State Zip

 City State Zip

 Phone Number

 Phone Number

 Phone Number

Consideration for a dependency override requires this form ATTACHED to the following documents:	
Student Signed Statement	<ul style="list-style-type: none"> A clear and thorough statement explaining any unusual circumstances that prohibit or hinder student from providing parental income information on the financial aid application (FAFSA). Unusual circumstances include: family violence, situations detrimental to physical or emotional well-being, situations in which parents cannot be contacted through normal means. Statement must provide: background information regarding estranged relationship with parent, when and how often contact occurs, and any attempts made to resolve the situation.
Documentation	<ul style="list-style-type: none"> Documentation of the situation described in statement. Documentation may include: court document, police reports, or signed letters from third party professional familiar with the family situation.
Third Party Letters	<ul style="list-style-type: none"> Letters from people outside your immediate family confirming or explaining the situation in detail. Each letter must describe the relationship to student or student's family, and the length of time the relationship existed. Third party letters from professional must be on company/business letterhead.
Completed FAFSA	<ul style="list-style-type: none"> Completed 2017-2018 FAFSA application
Situations not clearly explained and documented will not be considered	

I hereby certify that all information and documentation reported and attached to this form is true, complete, and accurate. I understand false statements or misrepresentations will be cause for denial, reduction, and/or repayment of financial aid.

 Student Signature

 Date

<u>Office Use Only</u>	
Approved	Denied
Decision by: _____	Date: _____
Revised 01/17	