

Complete this side only if you have never had a dependency override approved at SUSCC

In some cases students state that they are unable to provide parent information due to a special circumstance. Based on the information provided on your FAFSA application, you stated that you are *unable to provide parent information due to a special circumstance*.

A financial aid administrator (FAA) may do dependency overrides on a case-by-case basis for students with unusual circumstances. However, **none** of the conditions listed below, singly or in combination, qualify as unusual circumstances meriting a dependency override:

1. Parents refuse to contribute to the student's education.
2. Parents are unwilling to provide information on the FAFSA 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 (and may cause any of the above conditions) abandonment by parents, an abusive family environment that threatens the student's health or safety, or the student being unable to locate his parents. In such cases a dependency override might be warranted.

One of the following forms of documentation must be provided to support your special circumstance. The list below is documentation that is acceptable:

- Court Documentation with specific terms and/or language
- Police Report
- Hospital Records
- High School Records
- A Third Party Letter on Letterhead *a third party is considered a teacher, counselor, employer, medical authority, member of the clergy, prison administrator, government agency, or court.*

Please provide an explanation of your situation with this form as well as documentation supporting your claim. (Be specific):

I confirm that the statement above and information provided is true and accurate to the best of my knowledge as of this date.

Print Name

Student ID

Student Signature

Date

OFFICE USE ONLY

____ Student statement and documentation reviewed; dependency override approved for _____.

____ Student statement and documentation reviewed; not sufficient to justify a dependency override for _____.

Financial Aid Administrator Signature

Date

Complete this side only if you have been granted a dependency override at SUSCC during the prior academic year

During a previous year, the Southern Union Financial Aid Office determined that your situation warranted a “dependency override.” This meant your eligibility for federal financial aid was determined without requiring you to submit parental information. The dependency override was based on an explanation of your special circumstances and supporting documentation. Federal regulations require that a student’s special circumstances must be reevaluated each year to determine if a dependency override is justified again.

Please provide an explanation of your current situation, including your relationship with your parents at this time, in the section below:

Remember that none of the conditions listed below, singly or in combination, qualify as unusual circumstances meriting a dependency override:

- 1. Parents refuse to contribute to the student’s education.*
- 2. Parents are unwilling to provide information on the FAFSA 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 (and may cause any of the above conditions): abandonment by parents, an abusive family environment that threatens the student’s health or safety, or the student being unable to locate his parents. In such cases a dependency override might be warranted.

I confirm that the statement I have provided above is true and accurate to the best of my knowledge as of this date.

Print Name

Student ID

Student Signature

Date

OFFICE USE ONLY

____ Student statement and previous documentation reviewed; dependency override approved for _____.

____ Student statement and previous documentation reviewed; not sufficient to justify a dependency override for _____.

Financial Aid Administrator Signature

Date