



Office of Financial Aid
 101 Braddock Road
 Frostburg, MD 21532
 Phone: 301-687-4301
 Fax: 301-687-7074

REQUEST FOR DEPENDENCY OVERRIDE

Academic Year 2011-2012

When you apply for federal student aid, your answers to certain questions on the Free Application for Federal Student Aid (FAFSA) determine whether you are classified as dependent on your parents or independent. Most traditional age college students are dependent and must report parental income. However, we realize there are a *limited* number of cases where unusual/extreme circumstances make a student independent. If you think you have an unusual/extreme situation that warrants a dependency override, you must provide proof of your situation. Therefore, in order for the Financial Aid Office to make this determination, you must supply the information requested below. The information listed under "Documentation Required" along with this completed form ***must be submitted together*** to the Financial Aid Office. Information that arrives under separate cover will not be considered. Once a Financial Aid Officer reviews the information you provide, he/she will determine if your circumstances warrant a change in your status to independent. Keep in mind this decision is based on the Financial Aid Officer's judgement, and it is final – you cannot appeal it to the U.S. Department of Education.

You will normally receive a response to your request within 10-14 business days. This response time may increase during peak periods (May-August).

Student Name (Please Print)	Social Security				
Number					
<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 40%; border-bottom: 1px solid black; padding-bottom: 5px;">Address</td> <td style="width: 20%; border-bottom: 1px solid black; padding-bottom: 5px;">City</td> <td style="width: 20%; border-bottom: 1px solid black; padding-bottom: 5px;">State</td> <td style="width: 20%; border-bottom: 1px solid black; padding-bottom: 5px;">Zip</td> </tr> </table>		Address	City	State	Zip
Address	City	State	Zip		
Home Phone	Work Phone (if applicable)				

Award Period for which you are requesting consideration:

Fall2011
 Spring 2012
 Fall/Spring 2011-2012

DOCUMENTATION REQUIRED:

1. Letter from you describing your situation in detail including information about living arrangements.
2. Signed letters (with telephone numbers) from at least three others who have specific information about your situation, including information about your living arrangements. At least one of these letters must come from a professional familiar with your situation, such as a high school guidance counselor or clergy member. Other individuals who may provide supplemental letters include family members, or other individuals from your hometown who know specific information about your situation. (Information supplied by a current FSU student on your behalf will not be considered).
3. Other documentation that may support your claim to independence. Examples of other acceptable documentation may include court documents, police reports, or letters or documents from other agencies such as the Department of Social Services. Depending on your situation, this type of information may be required to support your case for a dependency override. In such cases, an override will not be granted until this documentation is provided to our office.
4. Signed federal IRS forms from you for calendar years 2009 and 2010 (if applicable).

CERTIFICATION:

My signature certifies that the information I have attached to this form is accurate and correct to the best of my knowledge. My signature also gives the Office of Financial Aid permission to contact any of the persons referred to in my documentation. If I have purposely given false or misleading information, I understand that I will have to repay aid I received. In addition, I may be referred to the Secretary of Education and may be fined \$10,000 and/or sent to prison.

Student Signature

Date