

2023-2024 Dependency Override Appeal Form



Student's Name _____ JCU ID _____

This form is for dependent students who do not meet the federal criteria for independent status as outlined on the Free Application for Federal Student Aid (FAFSA) but who would like to have their unique situation reviewed. A Dependency Override is granted on a yearly basis. Therefore, a student must reapply for a Dependency Override in subsequent academic years. Complete and submit this form along with supporting documents to the office. Incomplete forms will delay processing. The information will be reviewed by the appeal committee and you will be notified through your JCU email account of the decision along with an explanation of any further actions necessary to complete the application.

What conditions COULD warrant a Dependency override?

- Your custodial parent has died and the other natural parent is still living, however you have not had contact with or received any financial support from the living parent for a significant period of time.
- Parental abuse (drug, alcohol, physical or emotional) where police or court involvement is on record.
- Parental mental incapacity
- Your family situation is unsound. The dysfunction may result from abuse and a professional counselor has counseled you to live apart from your parent(s)
- Parental Incarceration

By Federal Law, the following conditions DO NOT warrant a Dependency override?

- Parents refuse to provide information on the FAFSA application or for verification
- Parents unwilling or unable to contribute to student's education
- Student demonstrates self-sufficiency or do not live with parents
- Student reluctant to request income information from parents
- Student does not wish to communicate with parents
- Student does not want parent's assistance to pay for college
- Student has ongoing arguments with parents' and due to this the parents have refused to help student

***** Information needed for Renewal Request:

If you received Financial Aid as an Independent Student in a prior year at JCU, **provide an updated letter describing your current situation and relationship with your parent(s) and complete the reverse side of this form.**

***** Information needed for New Request:

- 1. Personal Statement** Attach a letter explaining your situation. You must describe your current relationship (even if it is non-existent) with your mother and your father, their whereabouts, include their full address and their current living arrangements. Include the last contact you had with each parent and the frequency of contact with each over the past 5 years. Explain where you live and who you live with and if this person supports you. If one of your biological parents had deceased, include the death certificate.
- 2. Third Party Professional Statement** Provide a **signed** letter (on official letterhead) from an objective third party professional adult who can corroborate your circumstances and has been involved in a professional capacity. Examples of third-party professional include; guidance counselor, police officer, physician, social worker, clergy member, teacher, employer or mental health provider.
OR Document a protection/restraining order that prohibits you from having contact with your parent(s).
OR Document your parent(s) incarceration or that a parent(s) is institutionalized.
- 3. Personal Third-Party Statement** Provide a **signed** letter from a third-party adult; aunt, uncle, grandparent who personally have the knowledge of your situation and can corroborate the facts you present in your statement. The letter must include details as to how the person knows you, how long they have known you and how they have been involved and/or have firsthand knowledge of the situation. A telephone number and address where the individual can be reached must be included in this signed statement.

SEE REVERSE

Supporting Documents:

- (1) Submit a copy of your Federal Tax return from 2022 & 2021
- (2) Submit a copy of your last paystub showing YTD and document untaxed income
- (3) Submit a copy of your health insurance card and your automobile insurance card
- (4) If you did not work you must provide a written explanation of how you are supported in 2022 and 2023

Residence Information: (mark one)

Where did you live in 2021? On Campus With Parents Other, explain _____
Where did you live in 2022? On Campus With Parents Other, explain _____
Where do you live in 2023? On Campus With Parents Other, explain _____

Expenses:

Did your parent(s) provide your health insurance in 2021? Yes No
Did your parent(s) provide your health insurance in 2022? Yes No
Do your parent(s) provide your health insurance in 2023? Yes No
Did your parent(s) provide your auto insurance in 2021? Yes No
Did your parent(s) provide your auto insurance in 2022? Yes No
Do your parents(s) provide your auto insurance in 2023? Yes No

Who pays your cell phone bill? _____
Were any bills paid on your behalf? _____ **Who paid these bills?** _____
What is that person’s relationship to you _____

Parent Information: (natural or adoptive parents)

**** Parent 1 ****

Name: _____ Address: _____
When did you last live with parent 1? _____ (mo/yr)
When did parent 1 last provide any monetary support for you? _____ (mo/yr)
When was the last time you had contact with parent 1? _____ (mo/yr)
How often do you have contact with parent 1? _____ ie: once a week, once a month, no contact

**** Parent 2 ****

Name: _____ Address: _____
When did you last live with parent 2? _____ (mo/yr)
When did parent 2 last provide any monetary support for you? _____ (mo/yr)
When was the last time you had contact with parent 2? _____ (mo/yr)
How often do you have contact with parent 2? _____ ie: once a week, once a month, no contact

 **CERTIFICATION**

By signing this certification, I confirm that all information reported on this Form in support of my application for financial assistance is complete and correct. I understand that completing this appeal does not guarantee an override of my dependency. If my appeal is not approved then I in order to received federal aid, I will submit my FAFSA providing parent information.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to jail, or both.

Student Name _____ JCU ID _____

Student Signature _____ Student Phone Number _____

Sign manually with pen