Dependency Override Review 2023-2024

Website: financialaid.highline.edu
Email: financialaid@highline.edu



Where to submit this form: You can submit this form using our <u>Document Upload Form</u>

How to check your status online: Go to your Financial Aid Portal

Student Information			
Last Name	First Name	Date of Birth (mm/dd/yyyy)	ctcLink ID Number

Dependency Status Information

Federal Regulations and Dependency Status

- 1. Financial aid regulations identify families as being primarily responsible for providing for the educational needs of their children.
 - Therefore, dependent students are required to complete the FAFSA using their parents' income and asset information in addition to their own information.
- 2. However, in extraordinary and unusual circumstances such as abusive family environment or parental abandonment, students can override this requirement.
 - If you cannot provide parental information for some unusual reason, you may file this form and petition to override dependency and become an independent student i.e. one who does not have to provide parental information or signatures.
- 3. The decision of the Financial Aid Office is final and cannot be appealed.
- 4. An approved Petition for Dependency Override is granted on a yearly basis.
 - Students with an approved petition must reapply each year by submitting a letter that their circumstances have not changed.

Situations Ineligible for Override Approval

The Financial Aid Office cannot grant a dependency override in the following circumstances:

- Claiming that you support yourself (even if you claim yourself on your own tax return). For example, you moved out from your parent's home and now you live on your own and pay your own expenses. You cannot be declared an independent student for Financial Aid purposes under this reason alone.
- Your parents are unwilling to provide their information on the FAFSA.
- Your parents do not have enough money to help pay for school.

Required Documentation

Provide the following:

	ndependent -	V1: Verification	Form 2023-2024
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- ☐ If you did not work in 2021, explain how your living expenses/needs are being met.
- □ Statements from at least two adult professionals who can verify the family circumstances that you described in your personal statement.
 - The statements must be from professional adults who have direct knowledge of your situation.
 - One letter must be from a professional from whom you have sought treatment or assistance. Professionals include guidance counselors, doctors, lawyers, family counselors, social workers, law enforcement officers, clergy members, etc.
 - If a family member, who is not your parent, has raised you or is currently supporting you, submit an additional statement from that family member.
 - The statements you submit must be signed originals but supporting documentation may be photocopies.

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 Supporting documentation which may include, but is not limited to: Documentation confirming parent is deceased, incarcerated or institutionalized. Court documents confirming that there is a protection/restraining order that prohibits contact with parent(s). Copies of official court documents are also acceptable.
Signature
I affirm that the information provided in this application and other financial aid documents is true and correct to the best of my knowledge. I agree that I have reviewed, understand and agree to the conditions, responsibilities and obligations in order to receive financial aid for the 2023-2024 academic year as stated in the Conditions of Award, and Satisfactory Academic Progress Policy available on the Financial Aid website. I also understand if I submit all required items after the published deadline, tuition is my responsibility and the Financial Aid Office will not hold my classes.
Student Signature: Date:
he college provides equal opportunity in education and employment and does not discriminate on the basis of race, color, national origin, age, disability, sex, sexual orientation, marital status, creed, religion, or status as a eteran of war. Prohibited sex discrimination includes sexual harassment (unwelcome sexual conduct of arious types). Students who need disability accommodations should contact Access Services in Building 25, th Floor, room 531, email: access@highline.edu, phone: (206) 592-3857 TTY (206) 592-4853, VP (253) 237-1106.
Financial Aid Determination
* This section to be completed by Financial Aid Office only
 □ Approved □ Submitted any appropriate corrections to ISIR □ Tracked in PJ
Denied Reason for denial:

Financial Aid Advisor Initials: ______ Date: _____