



2021-2022 Professional Judgement Dependency Overrides

Student Name: _____ ID#: _____ Phone#: _____

PLEASE READ CAREFULLY BEFORE COMPLETING THIS FORM

If you feel there are extenuating circumstances, which might warrant you being considered independent of your parents, you do not need to provide parental information when filling out the FAFSA. Your school will receive an incomplete Student Aid Report (SAR) and will be asking you for documentation to support your claim. By petitioning, you are asking us to relieve your parents of the responsibility for using their resources to pay part of your college costs. Only very extenuating circumstances will make it reasonable to approve such a petition.

None of the conditions listed below qualify as unusual circumstances meriting a dependency override:

- | | |
|---|---|
| 1. Parents refuse to contribute to the student's education; | 4. Student demonstrates total self-sufficiency; |
| 2. Parents (includes step-parents) are unwilling to provide information on the FAFSA or for verification; | 5. Parents live in another country |
| 3. Parents do not claim the student as a dependent for income tax purposes; | 6. Students not living with their parents does not automatically qualify for a dependency override. |

Examples of Unusual circumstances can include:

1. An abusive family environment that threatens the student's health or safety.
2. Abandonment by parents
3. Parents are incarcerated

STEP 1: Complete the 2021-2022 FAFSA at <http://www.studentaid.gov/>

If you feel there are extenuating circumstances, which might warrant you being considered independent of your parents, you do not need to provide parental information when filing out the FAFSA. Your school will receive an incomplete Student Aid Report (SAR) and will be asking you for documentation to support your claim.

STEP 2: Indicate with your initials whether you are requesting a dependency override for the first time, or are requesting a renewal of a previously granted dependency override.

NEW REQUEST FOR INDEPENDENT STATUS CHECKLIST

If this is your first time submitting a dependency override request, ***you must submit all items listed below. We will not process a request without all required documentation.*** Please note that additional documentation may be requested.

1. **Letter 1- Student:** A typed statement explaining your extenuating circumstances that makes you independent based on your relationship with your parents. Statement must include the following information:
 - Name of both parents and where they are located
 - Why you do not have contact with each of them
 - When was the last time you had contact with them (this includes holidays and birthdays)
 - Reason why you are unable to obtain information and support from them
 - How you support yourself or/and who has provided financial support
 - Where and with who do you live (provide address)
 - Statement must be sign by student.



2. **Letter 2- Relative or Friend.** A detailed statement from a friend or relative that can attest and describe your extenuating circumstances. Statement must include the following information:
 - Relationship to student
 - Name of both parents and where they are located
 - Why student does not have contact with each of them
 - When was the last time student had contact with them (this includes holidays and birthdays)
 - Reason why student is unable to obtain information and support from them
 - How student support her/his self or/and who has provided financial support
 - Where and with who student lives (provide address)
 - Statement must be sign and include a telephone number.
3. **Letter 3- Letter from a Professional**
A detailed statement from a professional not related to student. Example: doctor, teacher, minister, social worker, psychologist, or high school counselor. Statement must include the extenuating circumstances of student and both parents. **(Must use official letterhead or stationery for the organization, include telephone number and signed)**.
4. Attach any relevant documentation that you think may support your petition (police reports, court reports, death certificates, etc.).
5. Documentation of where you have lived since January 2019 (e.g., signed lease agreements, housing contract, statement from person providing housing and relationship to you).
6. A signed copy of your 2019 Federal Income Tax Return or a 2019 Letter of Non-Filing from IRS office.
7. Verification documents- 21/22 Household Form, 21/22 Dislocated Worker, 21/22 Non- Tax Filer Form-Student and 21/22 Asset Form-Student. **Additional documentation may be required after initial review.**

RENEWAL REQUEST FOR INDEPENDENT STATUS CHECKLIST

If you were granted a dependency override in 2020-2021, **you must submit all items listed below. We will not process a request without all required documentation.** Please note that additional documentation may be requested.

1. **Letter 1- Student.** An updated typed statement explaining your extenuating circumstances making you independent from your parents. Example:
 - Name of both parents and where they are located
 - Why you do not have contact with each of them
 - When was the last time you had contact with them (this includes holidays and birthdays)
 - Reason why you are unable to obtain information and support from them
 - How you support yourself or/and who has provided financial support
 - Where and with who do you live (provide address)
 - Statement must be sign by student.
2. **Letter 2- Relative or Friend**
An updated statement from a friend or relative that can attest and describe your extenuating circumstances. Statement must include the following information
 - Relationship to student
 - Name of both parents and where they are located
 - Why student does not have contact with each of them
 - When was the last time student had contact with them (this includes holidays and birthdays)
 - Reason why student is unable to obtain information and support from them
 - How student support her/his self or/and who has provided financial support
 - Where and with who student lives (provide address)
 - Statement must be sign and include a telephone number



- 3. Attach any relevant documentation that you think may support your petition (police reports, court reports, death certificates, etc.)
4. Documentation of where you have lived since January 2019 (e.g., signed lease agreements, housing contract, statement from person providing housing and relationship to you).
5. A signed copy of your 2019 Federal Income Tax Return or a 2019 Letter of Non-Filing from IRS office.
6. Verification documents- 21/22 Household Form, 21/22 Dislocated Worker, 21/22 Non- Tax Filer Form-Student and 21/22 Asset Form-Student. Additional documentation may be required after initial review.

STEP 3: The following requested information is used in our office to review student's petition for independent status. Even though you might meet all guidelines, it does not guarantee status will be changed to "Independent".

Make sure you complete every section if not it will be consider INCOMPLETE.

Parents and Student Information

Parent 1 Name: Phone Number:

Address: City: State: Zip Code:

Do you have contact with parent 1? No Yes. When was the last time that you had contact?

Did you live with Parent 1 during 2019? No Yes. When was the last day that you lived with parent 1?

Parent 2 Name: Phone Number:

Address: City: State: Zip Code:

Do you have contact with parent 2? No Yes. When was the last time that you had contact?

Did you live with Parent 2 during 2019? No Yes. When was the last day that you lived with parent 1?

Student complete current permanent address (address, city and state):

Since when have you lived at this address? / / (month/day/year)

Whom do you live with (name and relationship):

Reason for Dependency Override Petition

Please select all that applies to you and provide the name of the parent. You must provide documentation.

Incarcerated Parent (s)

Abuse family environment.

Parental Abandonment

Custodial Parent Deceased

Name of the deceased parent: Date of death:

Other

1. Do you receive or have you received financial support from your parents in the past year (such as monetary gifts, payments of bills, cash for personal expenses, etc.)? No Yes
If yes, indicate the amount and type of support for 2019?

2. When did you stop receiving support?

3. Did your parent(s) claim you on their Federal Tax Return for 2019? NO YES

For office use only: Received by



- 4. Did you work on 2019? [] Yes, attach a signed copy of the 2019 IRS Tax Return... [] No, attach a 2019 Letter of Non-Filing...
5. Did your parent(s) provide your health insurance for 2019? [] No [] Yes

Complete the table below. If an item does not pertain to you, write N/A for the amounts. Please do not leave anything blank or form will be returned.

MEANS OF SUPPORT FOR 2019

Table with 2 columns: Support Type (Wages, Self-Employment, Worker's Compensation, Unemployment Benefits, Housing Section B, Food Stamps) and Amount (\$).

Table with 2 columns: Support Type (Military Benefits, Disability Benefits, Social Security Benefits, Other Income, Assistance from family members) and Amount (\$).

I understand that the financial aid office may request additional documentation. I further understand that my financial aid will remain incomplete until all necessary documents are submitted. By signing this form, I certify that all information reported on this form is complete and correct to the best of my knowledge.

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

Student Signature: _____ Date: _____

Upload document via your TSC Online - Financial Aid Self Service portal. For questions contact us via email at financialaid@tsc.edu Or by phone at (956) 295-3620

For office use only: _____ Approved _____ Denied

Comments: _____

Financial Aid Officer: _____ Date: _____

For office use only: Received by _____