2017-18 Dependency Override Appeal Form

Student’s First Name

9-digit WSU Student ID #

Student’s Last Name

Phone Number

Who should submit this form
Dependent students who do not meet the federal criteria for “independent” status as outlined on the FAFSA but who would like to have their unique family circumstances reviewed to determine if they qualify to be considered an independent student for financial aid purposes should submit this form. **Note:** If your dependency override was approved in previous years, please provide our office with a statement explaining your current situation.

When to submit this form
Submit the Dependency Override Appeal Form at minimum four to six weeks before the start of the semester. Incomplete appeals will result in a delay in processing. **Notice:** Late submission of the form may result in a loss of federal aid if the deadline to process aid eligibility for the term has passed.

QUALIFYING DEPENDENCY OVERRIDE CIRCUMSTANCES
You may qualify for a dependency override if you are estranged from your parents due to abuse, family alcoholism, drug abuse or other unusual circumstances beyond your control. Third party documentation is required. See the Required Documentation section below.

If one of the following conditions applies to your status, DO NOT complete this form. Complete the form that applies to your status, which is available on our website: (1) Orphan/Ward of the Court/Foster Care, (2) Emancipated Minor/Legal Guardianship, or (3) Unaccompanied Minor or Homeless Youth.

REQUIRED DOCUMENTATION

1. **2017-18 FAFSA.** Due to your parents’ information missing from the form, the federal processor, the U.S. Department of Education, may assign the status “Rejected” to your FAFSA. The Office of Student Financial Aid will receive the document.

2. **ATTACH your Personal Statement,** which includes the following information:
   - A detailed explanation of your current relationship with each of your parents. If you are estranged, provide details of the circumstances that caused the estrangement.
   - The date on which you last spoke with your parents.
   - Where you are living. Do you live with someone other than your parents?
   - How you are able to pay for living expenses such as rent, groceries and utilities.

3. **ATTACH Supporting Documentation** that substantiates the reasons for your dependency override request. For **EXAMPLE:**
   - Documentation to confirm that a parent is deceased, institutionalized, or incarcerated.
   - Documentation confirming a protection/restraining order that prohibits you from having contact with your parents.
   - Other legal documentation that explains why parents’ information should not or cannot be obtained for your financial aid file.
   - Two signed letters verifying the reasons for your dependency override request. These letters should come from responsible adults, e.g., high school or college counselor, social service agency official, pastor or clergy member, mental health professional, law enforcement officer, teacher, etc. They must verify the family circumstances you described in your personal statement. If the letters are from an outside offfice/agency, they must be on official letterhead stationary.

**Note:** You may be asked to supply verification of your income. Check Academica often for any new requirements.

REQUIRED SIGNATURE: I certify that the information I have provided on this form and on all documents is true and complete to the best of my knowledge. If requested, I agree to provide proof supporting information.

Student’s Signature

Date

Print your Name and Student ID Number on All Documents - Return this form with all documents attached to: **OFFICE OF STUDENT FINANCIAL AID • The Welcome Center • P. O. Box 2340 • 42 West Warren • Detroit, MI 48202-0340**