



437 Pequot Avenue New London, CT 06320 Phone: 800-443-2811 Fax: 860-701-5090

Dependency Override Form

_____			_____
Student Last Name	First Name	M.I.	Last 4 digits of student Social Security Number
_____			_____
Address			Date of Birth
_____			_____
City	State	Zip Code	Student's Cell Phone Number (include area code)
_____			_____
Student's E-mail Address			Student's Home Phone Number (Include area code)
_____			_____

If you are considered a dependent student according to the financial aid definition, your aid eligibility is determined by using parent income and asset information in addition to your information. Dependent students are required by law to provide parental information and signatures to be considered for financial aid.

Occasionally, students should not be considered a dependent. If you can document why you should be considered independent due to extenuating circumstances, you may petition for a waiver of federal regulations requiring parental information. In your petition you should answer each of the following items and submit required documents:

1. Written explanation of your extenuating circumstances. Include when, where and the nature of your contact with both parents.
2. Provide statements from two responsible adults who are aware of your situation. Ideally, at least one statement should be from someone who is not a relative or friend. Copies of appropriate court documents are acceptable to support your petition.

I certify that the documentation provided in this petition is true and correct:

Signature _____ **Date** _____