Financial Aid

1101 E University Ave, Fresno, CA 93741 | Phone: (559) 442-8245 | FAX: (559) 499-6024

2024-2025 DEPENDENCY OVERRIDE

Student Name:	Studer	nt ID #:
INSTRUCTIONS		
your parents, wh 2) Attach a Profess 3) Attach any legal	n a typed written explanation regarding your relationship with your pare thy you no longer have contact, and why your parents do not financially sional Third-Party Documentation letter (instructions at end of form). I documents or any other paperwork regarding your situation. If you steps 1 through 4 call the Financial Aid Office at (559) 442-8245 to moverride.	support you.
Student's Demographics	Address:	
Student's Present Living Arrangements		
	Derent's name	

Parent's Information When did you last live with your parent? (month/year)

Address:

When was the last time you had contact with your parent? (month/year) _______
When did your parent last provide financial support for you? (month/year)

How often do you have contact with your parent? _____

Other Parent's Information

When did you last live with your other parent? (month/year) ___

Other parent's name:

When was the last time you had contact with your other parent? (month/year)

When did your other parent last provide financial support for you? (month/year) _____

How often do you have contact with your other parent?

CERTIFICATION AND SIGNATURE

The person signing below certifies that all of the information reported is complete and correct. **Warning: If you purposely give false or misleading information, you may be fined, sent to prison, or both.** Signatures must be provided in blue or black ink. Digital and/or typed signatures will not be accepted.

Student Signature:	Date:
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THIRD PARTY DOCUMENTATION

In extraordinary and documented cases, the Financial Aid Office has authority to use professional judgment to override a student's dependency status to make a student independent for financial aid purposes. However, a student is **not** considered independent based solely on the following:

- The student is self-sufficient.
- Parents refuse to provide information or assist with educational expenses.
- Parents did not claim the student on tax return.

The information stated in the Dependency Override Request must be verified by a professional third party who is aware of the student's home situation and can verify the information provided on the Dependency Override Request. Examples of such a person include, but are not limited to employer, clergy, social worker, attorney, court official, teacher, counselor, psychiatrist, psychologist, medical professional, law enforcement agent, etc.

Instructions for professional third-party documentation:

The third party documentation letter must be on official letterhead. The professional third party should include any information for which they have first-hand knowledge and that they feel best describes the student's situation. The following is a list of information that **MUST** be included:

- How long they have known the student.
- Their relation to the student.
- How long they have been aware of the student's situation.
- When the student last lived with and/or received financial support from the student's parents.
- Any knowledge of the student's relationship with their parents.
- The steps that the student has taken to establish their independence from their parents.

The third parties professional title, name and type of business, business address, telephone number, contact information, and third party signature should also be included.

DEPENDENCY OVERRIDE REQUEST FORMS WILL NOT BE ACCEPTED WITHOUT THE THIRD-PARTY DOCUMENTATION LETTER

THE FOLLOWING IS FOR OFFICE USE ONLY

☐ Using PJ, this student is independent	Decision based on the following unusual circumstances:	
☐ Denied		
☐ Postponed/Date	FAA Signature:	