2026-2027 DEPENDENCY OVERRIDE REQUEST FORM

Unmarried students under the age of 24 are generally required to provide parental data on the Free Application for Federal Student Aid (FAFSA) and are classified as dependent students. However, students with documented unusual and unavoidable circumstances may appeal to the Office of Financial Aid for a Dependency Override. A Dependency Override, if approved, allows a student to be considered an independent student for federal financial aid purposes only, and exempts the student from providing parental information on the FAFSA.

STUDENT INFORMATION

NAME: _____ STUDENT ID _____

EMAIL ADDRESS: _____ PHONE _____

CIRCUMSTANCES THAT DO NOT QUALIFY

The following circumstances — individually or in combination — do not meet the criteria for a Dependency Override:

- Parents or stepparents refuse to contribute to the student's education.
- Parents or stepparents are unwilling to provide information for the FAFSA or federal verification.
- Parents or stepparents do not claim the student as a dependent for income tax purposes.
- The student demonstrates total self-sufficiency.

QUALIFYING CIRCUMSTANCES

A Dependency Override is considered on a case-by-case basis. To qualify, the student's circumstances must fall into one or more of the following categories:

- Abusive family environment
- Abandonment and/or estrangement by parents
- Incarceration or institutionalization of both parents
- Parents cannot be located

REASON FOR APPEAL — SELECT ALL THAT APPLY

- ☐ Incarcerated parent(s)
- ☐ Physical or emotional abuse
- ☐ Documented abandonment
- ☐ Parents cannot be located
- ☐ Parental drug use / substance abuse
- ☐ Custodial parent deceased
- ☐ Homeless or at risk of homelessness (this will require completion of a separate form)
- ☐ Other (explain in personal statement)

Applications without a personal statement will not be considered.

REQUIRED DOCUMENTATION

All documentation submitted in support of this appeal must be as specific as possible, focusing on your relationship (or lack thereof) with your parents or stepparents — not on the absence of financial support. Please submit the following with this form:

- **A typed, detailed personal statement written in your own words explaining your unusual circumstances.**
- **Two (2) letters of support from non-relatives (e.g., employer, counselor, social worker, teacher, or clergy member) confirming the circumstances described in your personal statement. Letters must be on official business letterhead and indicate how long and in what capacity the writer has known you.**
- **Any official or legal documentation supporting your claims (e.g., police reports, school records, restraining orders, court documents).**
- **Proof of current residency (e.g., utility bill, medical records, high school records).**
- **Any additional documentation that demonstrates your independent status. Personal statements from third parties must be on business letterhead or notarized.**

Note: If selected for federal verification, additional documentation may be requested by the Office of Financial Aid.

To initiate your appeal, complete this form in its entirety and gather all required supporting documentation listed on Page 1. Submit your completed form and documentation to the Office of Financial Aid.

Review & Timeline

- All appeals are reviewed on a case-by-case basis. Submission of an appeal does not guarantee approval.
- The Office of Financial Aid reserves the right to request additional documentation as part of the review.
- Students will be notified of the outcome of their appeal via their Dominican University New York email address.
- All submitted information will be kept strictly confidential.

CERTIFICATION & SIGNATURE

By signing below, I certify that all information provided in this appeal and its accompanying documentation is true, complete, and accurate to the best of my knowledge. I understand that this request is subject to the professional judgment of the Office of Financial Aid at Dominican University New York, that additional documentation may be required, and that ALL DECISIONS ARE FINAL and cannot be appealed to the U.S. Department of Education.

WARNING: If you intentionally provide false or misleading information, you may be referred to the U.S. Department of Education and may be subject to fines, imprisonment, or both.

Student Signature	Date
Student Name (Print)	Student ID Number

FOR OFFICE USE ONLY

Decision: Approved Denied	**Notice Sent:**	**FAA Initials:**	**Date:**