



Appeal for Independent Status/Dependency Override



Academic Award Year _____

Department of Student Financial Assistance

1906 College Heights Blvd. #11018, Bowling Green, KY 42101-1018
PHONE: 270-745-2755 FAX: 270-745-6586
www.wku.edu/info/finaid

Full Name _____

WKU ID/SSN _____ Date of Birth ____/____/____

Current Address _____

_____ Street _____
_____ / _____ / _____ Phone Number _____
City State Zip

Students classified as dependent may request to be reclassified as independent based on documented adverse family circumstances. The criteria used to determine a student's dependency status for federal financial aid purposes are established by the **U.S. Department of Education**. If you feel you have an unusual circumstance, please submit this form with required documentation to the **WKU Student Financial Assistance Office**. Please keep in mind, the submission of this appeal form **WILL NOT GUARANTEE** a favorable change in your dependency status.

By Federal Law, the following are reasons that would **NOT** qualify for dependency override consideration.

1. My parents were angry with me and kicked me out of the house.
2. My parents and I don't get along and they refuse to provide assistance towards my education.
3. I am supporting myself financially.
4. Parent(s) or step-parent(s) refuses to provide financial information for the FAFSA or provide help with the student's education.
5. Parent(s) not financially able to pay for your education.
6. My parents do not claim me on their federal tax return.
7. My parents live in another state.
8. I was married after I submitted the FAFSA.

Please check **ONE** of the following circumstances. You **MUST** provide all supporting documentation or the form will **NOT** be reviewed.

Parent has died or is incarcerated and the other biological parent is still living, but you have had no contact or support from the living parent for a significant period of time.

- Submit a personal letter explaining your situation: how and when you became independent, providing the location of both biological parents and explain how you provided your basic needs (shelter, food, clothing, transportation, medical care, etc.). Please describe the current relationship, even if it is non-existent, with your biological parents.
- Submit at least **TWO** letters (**one letterhead**) from an adult in his/her profession (**clergy members, guidance counselors, teachers, professors, doctors, supervisor, family counselors, mental health professionals, or law enforcement officers**) who personally have knowledge of your situation and who can verify your circumstances. All letters must include details as to how the person knows you, how long they have known you, and how they have been involved and/or have first-hand personal knowledge of your situation.
- Submit a copy of a death certificate for the deceased parent (or obituary) or documentation showing that your custodial parent is currently incarcerated.

Unusual family circumstances. Circumstances such as a result of abandonment or an abusive home situation which is harmful to your physical or mental well-being.

- Submit a personal letter explaining your situation: how and when you became independent, providing the location of both biological parents and explain how you provided your basic needs (shelter, food, clothing, transportation, medical care, etc.). Please describe the current relationship, even if it is non-existent, with your biological parents.
- Submit at least **TWO** letters (**one letterhead**) from an adult in his/her profession (**clergy members, guidance counselors, teachers, professors, doctors, supervisor, family counselors, mental health professionals, or law enforcement officers**) who personally have knowledge of your situation and who can verify your circumstances. All letters must include details as to how the person knows you, how long they have known you, and how they have been involved and/or have first-hand personal knowledge of your situation.
- If applicable, please submit,
 - Court documentation (**i.e. temporary/legal custody, police report, social or behavioral health services agency**) to support your appeal.

Marital circumstances. The circumstances may be a result of a recent divorce after being married and maintaining residence apart from your parents, paying all expenses from your own income and assets.

- Submit a personal statement explaining the situation.
- Submit a copy of your divorce decree.
- Signed copy of your **most recent** federal income tax return (**1040, 1040A or 1040EZ**).
- Submit a copy of your mortgage or rental agreement.

All letters **MUST** be signed, dated, and include a telephone number and address where the individual can be contacted for follow up questions.

I hereby certify that all information in this appeal is true and complete to the best of my knowledge. I understand that failure to provide documentation will result in a denial, and submitting an appeal does not guarantee an override of my dependency status.

Student signature

Date

- FOR OFFICE USE ONLY! -

Approved _____ Denied _____ Date _____

Comments: _____

Signature of Committee Member

Signature of Committee Member

Signature of Committee Member

Signature of Committee Member

Signature of Committee Member