



**Southwestern Christian College Financial Aid Office  
201\_\_ - 201\_\_ Dependency Override Request**

**Student's Name:** \_\_\_\_\_ **ID:** \_\_\_\_\_

A student who cannot answer "Yes" to any of the FAFSA dependency status questions may request a dependency override if adverse family circumstances make it impossible or unsafe to provide parental information on his or her FAFSA. Examples of adverse family circumstances include parental abandonment of the student, and abusive family environment that threatens the student's health or safety, or an inability to locate your parents. The student must document that all financial and emotional contact with his or her parents has been severed as a result of these circumstances. **Adverse family circumstances do NOT include financial hardship, parental unwillingness to contribute to college costs or provide information on the FAFSA, parents not claiming the student as a dependent for tax purposes, or the student demonstrating total self-sufficiency.** The following requested information is used in our office to review student's petition for independent status. Even though you might meet all guidelines it does not guarantee status will be changed to "independent."

**PARENT AND PERSONAL INFORMATION**

If known, identify the location of both of your parents:

**Parent 1 Name:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**Parent 1 Phone Number:** \_\_\_\_\_ **Are you in contact? YES NO**

**Parent 2 Name:** \_\_\_\_\_ **Address:** \_\_\_\_\_

**Parent 2 Phone Number:** \_\_\_\_\_ **Are you in contact? YES NO**

Describe the last time you had contact with **each** of your parents - when, where, and the nature of the contact.

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**Please provide a personal statement indicating your relationship with parent(s). You may attach additional sheets to this petition if necessary.**

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**Please attach verification of 201\_\_ Income: Please check one.**

\_\_\_\_\_ I have attached a copy of my 201\_\_ federal income tax transcript.

\_\_\_\_\_ I have not filed and will not file a 201\_\_ federal income tax return. I have listed all of my income and earnings for 201\_\_ below, and have attached copies of all my W-2 forms.

Source of Income	201__ Amount
_____	_____
_____	_____
_____	_____

**Please attach verification of current living arrangements: Please check one.**

- \_\_\_\_\_ Copy of current lease or rental agreement
- \_\_\_\_\_ A signed statement from my current landlord or roommate verifying my tenancy. This statement must include your current address, the date you began living there, and the amount of rent you pay each month.

### Petition for Independent Status

**Student's Name:** \_\_\_\_\_ **ID:** \_\_\_\_\_

### LETTER OF REFERENCE INFORMATION

Three references are required. Each reference must write a letter addressing your living arrangements. Documentation and/or statements should be from people who are aware of your situation and know that you have not had contact with your parents. Fellow students are not acceptable. Only one of the three references can be from a friend or relative and *must be signed*. The remaining two must be professionals (school counselors, teachers, clergy, attorneys, therapists, etc...) *Professional references must be on letterhead and signed* as well.

**Please state the following references that will be attached to your application:**

#### LETTER OF REFERENCE 1

Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Employer: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_

#### LETTER OF REFERENCE 2

Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_  
Job Title: \_\_\_\_\_ Employer: \_\_\_\_\_  
Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**LETTER OF REFERENCE 3**

Name: \_\_\_\_\_ Relationship to you: \_\_\_\_\_

Job Title: \_\_\_\_\_ Employer: \_\_\_\_\_

Address: \_\_\_\_\_ Phone: \_\_\_\_\_

**CERTIFICATION**

I certify that the information submitted on this petition is true and correct and I understand that it will be used to override federal regulations regarding my dependency status. I certify that I qualify for consideration due to a breakdown in my family structure caused by abuse, abandonment or neglect.

I understand that if I move back with my parents or receive support directly or indirectly from my parents that I must and will report this information immediately to the Financial Aid Office.

I understand that purposely falsifying information may lead to the cancellation of my financial aid and will prevent me from receiving financial aid in future academic years. I also understand that any falsification found will be reported to the Department of Education and the Attorney General's Office and I may be prosecuted to the full extent of the law.

\_\_\_\_\_  
**Student Signature**

\_\_\_\_\_  
**Date**

TERRELL, TEXAS