

2011-2012 Dependency Override Request Form

Name _____ Student I.D. # _____ Phone _____

Dependency status is determined by specific criteria and can be changed by a financial aid administrator only in unusual circumstances. The Financial Aid Office assesses situations on a case-by-case basis and then makes a determination. A student cannot be determined to be independent just because

- the parents don't want to provide information on the FAFSA due to privacy concerns;
- the parents don't feel it's their responsibility to provide financial assistance for college;
- the parents no longer claim the student as a dependent on their taxes;
- or the student no longer lives at home.

Attach the following REQUIRED documentation to this form:

- Letter from you, the student, requesting a Dependency Override and an explanation of the following:
 - a. The nature of your relationship with your parents
 - b. The location of both of your parents and when you last had contact with them
 - c. Why you cannot obtain information and/or financial support from your parents
 - d. How you have been supporting yourself
- Two letters on letterhead from professional sources, i.e. pastor, social worker, teacher
- Another letter may be accepted from a family member
- A completed and signed copy of a Burlington County College 2011-2012 Verification Worksheet
- A signed copy of your 2010 federal tax return and W2 form(s)
- Court documentation, police reports, other legal documentation

Note: Students may be asked for additional documentation depending upon individual situations.

Please complete the following statement of your calendar year income and expenses:

INCOME (If any amounts are zero, please explain on a separate sheet.)

INCOME (Do not leave anything blank)	2011
Earned income (e.g., wages, salaries, tips, work-study earnings)	\$
Financial support received from parents	\$
Monetary value of other support (e.g., health insurance, room & board) received from parents	\$
Monetary value of other support (e.g., room & board) from persons other than parents (indicate individual's name and relationship to student)	\$
Amount of other annual income (indicate source)	\$
Social Security	\$
Welfare	\$
Unemployment Benefits	\$
Worker's Compensation	\$
Other Income (Explain)	\$
Total Yearly Income (Student)	

Relevant documentation necessary to support your request should be submitted: rent/lease agreements, rent receipts, utility receipts, and other information to document self-sufficiency.

I certify that the information above is true and complete to the best of my knowledge. I agree to submit proof of the information that I have provided above. I also realize that if I do not give such proof, my request will be denied, and parental data will be used for my aid application.

Student's Signature _____ Date _____

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