

1510 Lake Road Dyersburg, TN 38024 www.dscc.edu USE BLACK INK

## **Dependency Override Request**

Student's Name	Student I.D.	
criteria specified in	ne Higher Education Act (HEA), defines an independent student as someone who meets one of the eight the HEA and reflected on the Free Application for Federal Student Aid (FAFSA) or is a student for whom a strator makes a documented determination of independence by reason of other unusual circumstances.	
basis for students	cion Act allows an aid administrator to make dependency overrides on a <b>case-by-case</b> with unusual circumstances. <b>NONE</b> of the conditions listed below, singly or in ify as unusual circumstances or merit a dependency override:	
2. 3.	Parents refuse to contribute to the student's education; Parents are unwilling to provide information on the FAFSA or for verification; Parents do not claim the student as a dependent for income tax purpose; Student demonstrates total self-sufficiency.	
lf you can docเ	ment why you should be considered independent for some unusual reason, you may request a dependency override.	
Please check yo	our reason for the request:	
	or involuntary removal from parents' home due to an abusive situation that ed the student's safety and/or health	
O Incapacit	O Incapacity of parents such as incarceration or a disability or mental or physical illness	
O Inability o	of the student to locate the parent(s) after making reasonable efforts	

## **Acceptable documentation:**

- a court order
- police report
- legal document
- a letter from clergy, high school guidance counselor or teacher **and** relative that is aware of your situation

O Other extenuating circumstances sufficiently documented by a signed letter from a third party.

## Please complete:

- The Free Application for Federal Student Aid (FAFSA)
- This form
- A written explanation of why you should be considered an independent student

## Please turn in:

- This form
- Copies of any information used to complete the FAFSA (such as income tax returns, W-2's, and documentation of untaxed income).
- Your written explanation
- Any acceptable documentation. This request will not be processed if supporting documentation is not attached.

You can either mail, (1510 Lake Rd., Dyersburg, TN 38024) fax (731-286-3354) or drop off at any of our locations.

Due to the high volume of work in August and January, a decision may take up to **30 business days.**You will be notified via Dyersburg State email of the decision regarding your request.

By signing this statement, I certify that all information submitted is true and correct to the best of my knowledge. Misrepresentation of information may result in repayment of federal and state financial aid received.

Student's Signature	 Date
FO	OFFICE OF FINANCIAL AID USE ONLY
Previous Status:	Override:
Dependent Independent	Approved: Denied:
Comments:	
3v.	Date: