



# LANGSTON UNIVERSITY

## 2017-2018 DEPENDENCY OVERRIDE REQUEST FORM

In order to be considered an independent student, you must clearly demonstrate how your circumstances would warrant our office to make a professional judgment and override the federal definition of a dependent student. The U.S. Department of Education maintains the following situations **do not** justify a request for independent status; these include but are not limited to 1) a parent refusing to provide data; 2) a student who does not want to ask parents for information; 3) a student has been "on their own" for several years; 4) a student who doesn't communicate with parents or 5) parents refusal to help pay for college. Such students, if under the age of 24 would be "**dependent**" for financial aid consideration.

Student Name: \_\_\_\_\_ Student ID: \_\_\_\_\_

Address: \_\_\_\_\_  
Street City State Zip Code

LU E-mail Address: \_\_\_\_\_ Local Phone ( ) \_\_\_\_\_

**REQUIRED DOCUMENTATION: The required documents or explanations MUST be attached to this appeal. Provide your name on each document. Incomplete appeals will not be considered.**

✓ **STUDENT STATEMENT:** Submit a signed statement that clearly outlines 1) the extenuating circumstances you believe make you independent **and** 2) specifically describe how you supported yourself during the last calendar year. If a previous appeal was approved, an updated student statement is required.

✓ **THIRD-PARTY STATEMENTS:** Submit a minimum of **three** detailed third-party statements from other individuals supporting the fact you have unique and unusual circumstances. These statements may be from school counselors, administrators, clergy, physicians, social workers or other individuals who are familiar with your circumstances. The statements must be submitted on business letterhead and include phone number and address.

✓ **STUDENT'S TAX RETURN:** Submit a copy of both your 2015 and 2016 signed federal income tax returns with W-2s attached. This must correspond with your statement of self-support. Taxes must be signed. If no tax returns were filed, attach a detailed statement explaining how your basic living expenses were paid.

**PLEASE ANSWER THE FOLLOWING QUESTIONS:**

✓ Were you claimed by anyone on their 2015 or 2016 federal income tax returns? Yes \_\_\_\_\_ No \_\_\_\_\_

If YES, identify person, relationship and year: \_\_\_\_\_

**CERTIFICATION:** I hereby certify that all information reported on this form and any attachments hereto are true, complete and accurate. False statements or misrepresentations will be cause for denial, reduction, withdrawal and/or repayment of financial aid.

Student's Signature: \_\_\_\_\_ DATE \_\_\_\_\_

**FOR OFFICE USE ONLY:**

- Previously Approved
- Denied
- Returned to Student

- Approved \_\_\_\_\_ DATE
- Pending \_\_\_\_\_ DATE
- Documented on 348

Staff Signature \_\_\_\_\_ Date \_\_\_\_\_