



**2009-2010
Dependency
Override
Application**

**Complete, sign and return this form
with documentation to:**
Student Financial Assistance Office
University of Southern Indiana
8600 University Boulevard
Evansville, IN 47712
FAX: 812/461-5305

2009-2010 Appeal to Apply for Financial Aid as an Independent Student (Filing this form does not guarantee appeal approval).

Name: _____
Name: Last, First, Middle Initial USI Student ID (SSN if ID is unknown)

Current Mailing Address: _____
Street Address, City, State Zip Code

Phone: _____

YOU ARE CONSIDERED AN INDEPENDENT STUDENT FOR FINANCIAL AID PURPOSES IF YOU MEET ONE OF THE FOLLOWING CONDITIONS at the time you complete and sign the 2009-2010 FAFSA:

- you will be 24 years old by December 31, 2009 (born **before** January 1, 1986)
- you were married or separated but not divorced at the time you filed the FAFSA
- at the beginning of the 2009–2010 school year, you will be working on a master’s or doctorate program (such as an MA, MBA, MD, JD, PhD, EdD, or graduate certificate, etc.)
- you are a veteran of or are on active duty in the regular U.S. Armed Forces for purposes other than training
- you have children who will receive more than half of their support from you from July 1, 2009 through June 30, 2010
- you have legal dependents, other than a spouse or your own children, who live with you and receive more than half of their support from you, now and through June 30, 2010
- at any time since you turned age 13, both of your parents were deceased, you were or are in foster care or you were or are a dependent or ward of the court
- you were or are an emancipated minor as determined by a court in your state of legal residence
- you were or are in legal guardianship as determined by a court in your state of legal residence
- at any time on or after July 1, 2008, your high school or high school district liaison or a director of an emergency shelter or transitional housing program funded by the U. S. Department of Housing and Urban Development determined that you were an unaccompanied youth who was homeless
- at any time on or after July 1, 2008, the director of a runaway or homeless youth basic center or transitional living program determined that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless

Note: If you meet one of the above conditions you do not need to complete this form.

REASONS FOR APPEAL

Many students feel they are independent because they currently live on their own, their parents no longer claim them on their income taxes, their parents refuse to provide information on the FAFSA or because their parents cannot afford to help with college expenses. However, these reasons are not sufficient for an appeal. The Student Financial Assistance Office is required to consider parent information and expect a parental contribution for students who are not independent according to the above FAFSA definition **unless exceptions can be made. Exceptions can only be made when adequate documentation of extenuating family circumstances exists.** Extenuating circumstances are generally defined by the students' inability to have contact with their parents. Review the reasons for appeal below and check the one that describes your circumstance. **If none of these circumstances apply to your situation, do not complete this form.**

- 1. Severe circumstances within your family prevent you from obtaining your parents' financial information. Examples:
 - an abusive home situation which is detrimental to your physical or mental well-being
 - abandonment by both parents
 - history of parental alcohol or drug abuse
 - incarceration of the custodial parent
- 2. Death of a parent after filing the FAFSA and the surviving parent meets one of the conditions listed above in number 1.
- 3. You are a non-citizen of the United States of America (who is otherwise eligible to receive Federal financial aid) and your parents currently reside in a foreign country. However, you are unable to communicate with your parents because of a long-standing political policy or civil unrest in your parents' country of residence.
- 4. You are divorced after being married for at least two years and maintained a residence apart from you and your former spouse's parents during the time you were married. You now maintain a separate residence from your parents and pay all expenses from your own income and assets.

PERSONAL STATEMENT AND DOCUMENTATION

Attach a written personal statement (preferably typed) that completely and explicitly explains the basis of your appeal. Please note that your statement will be used only to determine if a dependency exception should be made and the information will be held in strictest confidence. Make sure your statement is signed and dated. Attach at least two acceptable sources of documentation that verify **all** the facts of your appeal. Acceptable sources of documentation are listed below according to the reason for your appeal.

If you checked reason #1, provide two or more of the following acceptable sources:

Signed statements from two adult professionals who are not family members that verify the family circumstances described in your personal statement. Adult professionals include clergy members, attorneys, school guidance counselors, medical doctors, mental health professionals, teachers or professors, law enforcement officers, professional staff of Children and Family Services (Public Assistance Department), and officers of the court. Letters must be signed originals on agency letterhead with the professional title (Counselor, Rabbi, etc.). Personal references that do not represent an agency opinion must be notarized.

If you checked reason #2, provide two or more of the above sources and a photocopy of your parent's death certificate or newspaper obituary.

If your last name is different from your parent's, please provide legal documentation of birth, adoption, marriage, divorce, or other circumstances that prove your relationship.

If you checked reason #3, provide the following sources:

Signed statements from the embassy or consulate of the country in which your parents live which clearly states that the policies of that country or of the United States of America prevent mail and funds to be readily transferred between residents of the United States and their country. If an official government statement is not readily available, a similar statement from a refugee organization on their letterhead is acceptable. In addition, a notarized statement from your sponsors (if applicable) or a family member verifying the level and type of support you receive from family, friends, or sponsors.

If you checked reason #4, provide all of the following sources:

Complete copies of your marriage license(s), divorce decree(s), federal tax returns (1040, 1040A, or 1040EZ) and W-2 forms for the period in which you were married, and mortgage or rental agreements for the period in which you were married. A signed and notarized statement from both of your parents verifying amounts of financial support of any kind (other than reasonable gifts for birthdays and holidays) or the absence of such support after you married.

MONTHLY EXPENSE WORKSHEET

CURRENT EXPENSES - Estimate your current monthly expenses below and how they are covered. Types of expenses are listed in the first column. Enter your estimate of **monthly** amounts in the second column. In the third column, give the name(s) and relationship(s) of the person(s) who pay(s) the expense or provides the item for you. If you pay the cost, enter "Self" in the third column.

Expense	Monthly Cost	Who Pays or Provides It
Housing	\$	
Utilities	\$	
Food	\$	
Clothing	\$	
Transportation	\$	
Medical	\$	
Personal	\$	

MONTHLY INCOME WORKSHEET

CURRENT INCOME - Describe your average **monthly** income and identify the source(s) by name (examples: Self-Employed, Burger King, Best Buy).

Type of Income	Monthly Income	Source(s)
Wages	\$	
Interest	\$	
Dividends	\$	
Untaxed Income	\$	
Cash Support	\$	
Other	\$	

ADDITIONAL INFORMATION (ANSWER ALL QUESTIONS BELOW)

- 1) In what year were you last claimed by your parent(s) as a dependent on a Federal Tax Return? (1040 or 1040A) Year _____
 - 2) When did you last live with your parent(s)? Month _____ Year _____
 - 3) When did you last receive financial support from your parent(s)? Month _____ Year _____
 - 4) Are you included as a dependent under your parents' medical plan? Yes/No _____

 - 5) Do you own or have the use of an automobile while attending USI? Yes/No _____
If yes, give the name and address of the registered owner. _____

- If you are the registered owner, provide the following information.
 Year, Make, and Model _____
 Purchase Date _____ Balance Owed \$ _____
 Monthly Car Payment \$ _____
- If anyone else is making your car payments, provide his/her name and relationship. _____
- 6) Did or will you file a 2008 Federal Tax Return (1040, 1040A, or 1040EZ)?
Yes/No _____ If yes, attach a complete signed photocopy.

STUDENT CERTIFICATION (READ CAREFULLY BEFORE YOU SIGN)

I hereby certify that all information contained in this appeal for independent status, including my personal statement and other documentation, is true and complete to the best of my knowledge. I swear or affirm that I have not knowingly or intentionally provided any false statements or fraudulent documentation. I understand that if I am found to have knowingly or intentionally given false or fraudulent statements and/or documentation, my appeal will be denied and my eligibility for Federal and State student aid jeopardized. **Note:** Federal regulations stipulate that evidence of fraud must be reported to the U.S. Department of Education for possible investigation by the Office of the Inspector General and possible prosecution by the United States Attorney.

Your Signature

Today's Date

FOR THE MOST ACCURATE AND UP-TO-DATE INFORMATION PLEASE CHECK YOUR MYUSI REGULARLY!

(DEPOVR)