



West Virginia State University

Office of Student Financial Assistance Academic Year 2016-2017

INSTRUCTIONS FOR REQUESTING A CHANGE IN DEPENDENT STATUS

Most unmarried undergraduates under the age of 24 are considered **dependent** for federal student aid purposes. If however, after answering the questions in the Student Status section on the Free Application for Federal Student Aid (FAFSA), you are classified as a dependent student but disagree with that determination, you may request a **dependency override**.

PLEASE READ THE FOLLOWING INFORMATION CAREFULLY BEFORE REQUESTING THE DEPENDENCY OVERRIDE:

The majority of dependency overrides are **NOT** granted.

1. The unwillingness of the family to pay or provide information is **NOT** a valid reason for requesting a dependency override. The Financial Aid Office can test only the ability to pay-not willingness. In **ALL** cases independence must have occurred out of **necessity** rather than choice.
2. Examples of such situations are abandonment, parental drug abuse, parental mental incapacity, physical or emotional abuse, parental incarceration or severe estrangement.
3. A dependency override request adds an additional 6-8 weeks processing time to your financial aid application.
4. A successful change in dependent status depends on the information you are able to provide. The more information and documentation you furnish, the greater the chance of having a dependency override approved.

If after reviewing the above information, you feel that the circumstances in your family warrant a dependency override, complete the Change in Dependent Status Form. You will also need to submit **ALL** of the following:

1. Submit a written request for review of your status (a personal letter stating your case).
2. Submit your tax return transcript for the most recent tax year (Log into:www.irs.gov or call 1-800-908-9946). You should be able to demonstrate at least \$6500 in income and you must have claimed yourself as a dependent **OR**
3. If you did not file tax returns, we must have a credible letter on how you supported yourself.
4. Submit letters from third parties who have knowledge of your situation and who can verify your circumstances. Letters from relatives are acceptable but at least one letter **MUST** be on letterhead from a clergyman, guidance counselor, physician or social worker. Include a telephone number and an address on all letters.
5. Submit the enclosed "Request for Change in Dependent Status" form with your request and a Verification Worksheet (obtain on the web at: <http://www.wvstateu.edu/financial-aid/forms-2016-2017>)
6. Submit a completed signed FAFSA form if you have not already filed for 2016-2017.

Your request for a dependency override will be reviewed and a decision will be mailed to you. Allow a minimum of **FOUR WEEKS** before checking the status of your request. Failure to answer all questions adequately or failure to furnish **all acceptable documentation** will cause your request to be **DENIED**. All information will be held strictly confidential.

WVSU Office of Student Financial Assistance

Request for Change in Dependent Status

Please read this entire form before completing it. If you cannot answer an item, explain why in the Comments section. You must file your Free Application for Federal Student Aid (FAFSA) at www.fafsa.ed.gov, before submitting this request. The Office of Student Financial Assistance reserves the right to request additional information.

NAME:

ADDRESS:

PHONE: _____

ID NUMBER:

In a separate letter, provide a statement indicating the reason(s) you are requesting a change in your dependency status. Your request must show extraordinary personal circumstances such as abuse, neglect, parental mental incapacity or other unusual family situations. **Legal documents and statements from individuals who are aware of your circumstances must be attached to this request.** At least one statement must be on **letterhead** from a guidance counselor, clergy, social worker, counselor or physician familiar with your situation.

TAX INFORMATION

* Provide photocopies of your federal income tax return transcript for 2015 (Log into: www.irs.gov or call 1-800-908-9946) and a signed Verification Worksheet that can be accessed at <http://www.wvstateu.edu/financial-aid/forms-2016-2017>.

If someone claims you as a dependent for tax purposes, provide copies of their 2015 federal income tax return transcript and explain below.

COMMENTS:

I certify that all information contained on this form is true and correct to the best of my knowledge:

STUDENT SIGNATURE: _____ **DATE:** _____

MONTHLY HOUSING INFORMATION

Student Name: _____

The following are paid by:

<u>ME</u>	<u>PARENT</u>	<u>OTHER</u>	<u>MONTHLY AMOUNT</u>
			Rent \$
			Gas/Electric \$
			Telephone \$
			Water/Sewer \$
			Cable \$
			Other(list) \$
			\$

- 1) Do you share some/all housing expenses with others? _____ If so, how many?
- 2) Is the property where you live owned by your parent(s) or other relative? ____ Yes ____ No
- 3) If you do not rent or own a home, explain your living situation:

- 4) Where do you live during periods when WVSU is not in session?

- 5) If you do not pay any of the expenses mentioned above, please explain: _____

OTHER MONTHLY EXPENSES

Student Name: _____

The following are paid by:

<u>ME</u>	<u>PARENT</u>	<u>OTHER</u>	<u>MONTHLY AMOUNT</u>
			Food \$
			Car/Insurance \$
			Gas/Repairs \$
			Charge Accts. \$
			Medical Bills \$
			Personal \$
			Other (list) \$

EMPLOYER/INCOME INFORMATION (Note: Do not include work study.)

Employer Name:
Employer Address:

- 1) Provide a signed statement from your employer giving date of employment, usual number of hours worked weekly and rate of pay.
- 2) If you have income other than wages, explain and provide monthly amount:
- 3) If you do not work, or have other income, explain how you support yourself:
- 4) If you do not pay any of the above mentioned expenses, please explain: