2018-2019
Dependency Override Renewal Request

*Appeal Guidelines:* You were previously deemed to be an independent student as a result of your documented extraordinary circumstances. We will consider a renewal request for subsequent award years only in cases where the student’s family situation has remained unchanged.

**Student’s Name (please print):** ____________________________  **ID:** __________________

**Renewal Request:** *The Office of Student Financial Aid may ask for supporting documentation and further clarification of the special circumstances you reported even if you were approved for a Dependency Override in a previous academic year/term.*

1) Submit the 2018-2019 FAFSA online at [www.fafsa.ed.gov](http://www.fafsa.ed.gov). When you get to the parent’s section, click the button to indicate that you cannot provide parental information. Be aware that your initial record status will be incomplete or rejected. If your appeal is approved, we will update your record status directly with the FAFSA processing center.

2) Visit the appeal page on our website, and click the button to submit your appeal electronically. In your personal statement, address the following items:
   a) Summarize your current situation and any changes that have occurred in your situation since you were originally granted a dependency override.
   b) Why you cannot provide parental financial information on the 2018-2019 FAFSA.
   c) An explanation of your continued estrangement from your biological/legal parents.
   d) Your living arrangements over the past year, and how have you supported yourself. Did anyone provide you with any type of financial support?

3) Upload this completed form as your supporting documentation.
   a) When (Academic Year) was your original Dependency Status Appeal submitted: _____________
   b) Did you resume living with your biological/legal parent(s) in the past year or current year? ☐ Yes ☐ No
   c) Did your biological/legal parent(s) provide you with any support in cash or contribute to paying for any part of your college expenses, including rent/room and food? ☐ Yes ☐ No
   d) Did anyone claim you on either of their 2016 or 2017 Federal Income Tax Returns?
      ☐ NO  ☐ YES, Person’s Name: __________________________ Relationship to you: __________________________

**Affirmation and Certification:**
By signing this document, I certify that all information contained on this form is true and complete to the best of my knowledge. Providing inaccurate or false information may result in the denial, reduction, withdrawal and/or repayment of financial aid.

**Student’s Signature:** ____________________________  **Date:** __________________________

**What Happens Next?**
We will review your appeal, and the supporting documentation that you previously submitted. If any additional documentation is necessary, we will notify you via the online appeal system and emails/texts if you opt-in.

Once your appeal is approved, we will notify you and we will submit a correction to the FAFSA Processing System with all appropriate dependency override codes. Your financial aid will be packaged based on independent status.

*Please be sure to read your emails, check your status, and follow-up timely so that we can keep your file moving through the process!*

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