

Dependency Status Appeal

Student Name _____ UV ID _____ Phone # _____

To be considered an independent student for financial aid, you must meet one of the following at the time you complete the FAFSA.

- You were born before January 1, 1985.
- At the beginning of the 2008-2009 school year, you will be working on a master's or doctorate program.
- You were married at the time of filing your 2008-2009 FAFSA.
- You have children who receive more than half of their support from you.
- You have a legal dependent other than a spouse, and you provide more than half of that person's support.
- Both of your parents are deceased and you don't have an adoptive parent or legal guardian, or are you a ward of the court or you were a ward of the court until age 18.
- You are currently serving on active duty in the United States Armed Forces for purposes other than training.
- You are a veteran of the United States Armed Forces

Students not meeting federal criteria for independent status may request a professional judgment adjustment to override the federal criteria. Dependency overrides will be considered on a case-by-case basis due to unusual circumstances. This may include inability to locate parents, an abusive family environment, or abandonment by parents.

Circumstances that **do not** merit a dependency override include, but are not limited to: parents refusing to contribute to the student's education, parents unwilling to provide information on the application or for verification, parents not claiming the student as a dependent for income tax purposes, student demonstrating total self-sufficiency.

All requests must be documented and show that all financial and emotional contact with your parents has been severed as a result of an unusual circumstance. You must submit non-returnable copies of your documentation to the Financial Aid Office. **Requests submitted without documentation will not be considered.**

Instructions

Carefully review the following information and select the statement which correctly identifies your situation and follow the directions.

- I would like to request an extension of a Dependency Status Appeal which was previously approved at UVU.**
1. Attach a **detailed** letter to this form which explains the history behind the unusual circumstance for which the appeal was approved, and the current status of the situation (for example, unchanged, reconciliation has occurred, etc.)
- I can document a long term estrangement, adverse home situation, or other qualifying circumstance.**
1. Attach a detailed, written statement explaining the history behind the estrangement, adverse home situation, or other circumstances. Include the reason you are not in contact with your parents, the date you last had contact with your parents, and details about how you have supported yourself since you last had contact with your parents.
 2. Attach **TWO** additional forms of documentation which support your claim. Documentation must be provided by an impartial third-party source that is familiar with your situation, and **must be on letterhead or notarized.**
- Examples include: school guidance counselor; medical professional; member of the clergy; teacher; social service representative; court documents; death certificates, etc.
- Letters of support should include the name and relationship (to you) of the person providing the statement, and state how long the agency or person has been aware of your situation.

Student Certification

Read the following information carefully. Initial and sign below. Your initials and signature on the form certifies that you have read and understand all the information below

Initials	Statement
	The Financial Aid Committee will not accept or review an appeal that is incomplete, or lacks a detailed statement and appropriate documentation. I am submitting a complete appeal with all necessary letters and documents (that are notarized or on letterhead).
	I understand it is my responsibility to be aware of all UVU deadlines. I am responsible for paying my tuition in full and on time, regardless of financial aid or this appeal. Failure to pay my tuition and/or fees may result in additional fees as well as my classes being dropped. I am responsible for any late fees or charges I incur as a result of not paying my tuition in full or on time. I am also responsible for getting my classes reinstated.
	It is my responsibility to check my UVLink often to find the status of my appeal. It is also my responsibility to stay informed of the Financial Aid policies and to monitor my own progress. I must contact the Financial Aid Office if my appeal is incomplete. I understand it is my responsibility to be aware of all UVU deadlines.
	I may need to provide further documentation upon review of my request. I understand I must re-apply each year.

Committee decisions are final. I certify that the information given in this appeal is accurate and complete.

Student Signature _____ Date _____