WESTMINSTER COLLEGE
2024-2025 PROVISIONAL INDEPENDENT FORM
(DEPENDENCY OVERRIDE)

Federal financial aid regulations assume that the family has primary responsibility for meeting the educational costs of students. If you are considered a dependent student according to the federal financial aid definition, your aid eligibility is determined by using parent information in addition to your information. Dependent students are required to provide parental information and signatures to be considered for financial aid, unless they have an unusual circumstance.

If you meet at least one of the following criteria, you are considered an independent student:

- Born before January 1, **2001**;
- Married, living with spouse;
- Enrolled in a graduate or professional degree program (beyond a bachelor's degree) in **2024-2025**;
- A veteran of the Armed Forces (or serving on active duty);
- Have children who receive more than half of their support from you;
- Have dependents (other than your children or spouse) who live with you and receive more than half of their support from you;
- At any time since age **13**; both parents deceased, been in foster care, or dependent or ward of the court;
- An emancipated minor as determined by a court in your state of legal residence;
- In legal guardianship as determined by a court in your state of legal residence;
- At any time on or after July 1, **2023** – your high school or school district homeless liaison determine that you were an unaccompanied youth who was homeless – the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determine that you were an unaccompanied youth who was homeless – the director of a runaway or homeless youth basic center or transitional living program determine that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless.

Occasionally, due to unusual circumstances students may not be considered dependent. If you can document why, you should be considered independent for an unusual circumstance, you may petition for a waiver of federal regulations requiring parental information.

Your status as an independent student cannot be based solely on your parents' unwillingness to contribute to your educational expenses or if you demonstrate total self-sufficiency. Thorough documentation is required to explain and verify your situation.

Please note that submitting this request does not guarantee approval of the appeal and that there is no guarantee an approved appeal will result in more or different types of aid awarded to you. Dependency overrides are not automatically renewed each year; if your request is approved and you plan to attend school during a subsequent aid year, you must complete a request form for each new year.

Section A: Student Information

Last Name	First Name	M.I.

Student ID #	Phone Number	Email Address

Section B: Please complete the information below. *Note: The Financial Aid Office reserves the right to request additional documentation, if needed.

Complete the following questions and provide all of the required documentation. Incomplete submissions will not be considered. Make sure your name and student ID number are clearly marked on all attachments.

1. Did you file a dependency override request at Westminster College prior to the **2024-2025** academic year?

☐ **YES**, but my request was denied.   **OR**

☐ **NO**, I have not filed a previous request. (Go to question 2 and complete the remainder of this request form.) **OR**

☐ **YES**, the request was approved. (Provide a narrative below detailing your current situation, and then skip to question 6 to read and sign the certification statement. Please also attach a signed copy of your most recent Federal Income Tax Return to this completed form.)

_____

_____

_____

2. Provide a narrative detailing the unusual circumstances you believe we should consider in evaluating your request, including how you plan to support yourself and your educational efforts without support from your parents. Attach additional sheets if necessary.

_____

_____

_____

3. Full Name and Address for each of your parents.

Parent 1 Name: _____   Parent 2 Name: _____

       Address: _____   Address: _____

            _____   _____

        Phone: _____   Phone: _____

4. Are you (or have you been) involved in a case of abuse against your parents? ☐ **YES** ☐ **NO**

If **YES**, required documentation: A police report, certification from a professional counselor, and/or other court documents confirming your circumstances and stating that you are in imminent danger if a relationship is maintained with your parent(s).

5. Describe your last contact with each of your parents (when, where, and nature of the contact). Attach additional sheets if necessary.

_____

_____

_____

_____

_____

_____

6. Attach statements from two people who are aware of your situation. Statements must be from a professional, on agency letterhead (examples include high school and professional counselors, social workers, teachers, police and religious leaders).

Copies of appropriate court documents are also acceptable. Provide the following information for the two people providing statements.

_____

Name	**Phone number**	**Relationship**

_____

Name	**Phone number**	**Relationship**

7. I have reported my **2022** income on my FAFSA. ☐ **YES** ☐ **NO**
      If **NO**, submit your **2022** Tax Return Transcript and your **2022** W2 form(s) for any income earned from working.

Certification statement: I am requesting to have my dependency status for financial aid purposes reviewed. By signing this form, I certify that the information provided on this form is truthful and accurate. If I am asked, I agree to give proof that my information is correct. If I provide false or misleading information, I understand that I may be fined $10,000, sent to prison, or both.
I understand that the Office of Financial Aid reserves the right to request additional information. I authorize Westminster College Office of Financial Aid to contact the persons named in Item 6 (above) for additional or clarifying information.
I will notify Westminster College Office of Financial Aid if circumstances change.

_____   _____

Student Signature   **Date**

FAA Administrator Use Only: ___ Approved   ___ Denied

Name: _____

Signature _____   Date _____

Completed forms can be mailed to: Office of Financial Aid ~ 319 S. Market Street New Wilmington, PA 16172
Or emailed: finaid@westminster.edu Or faxed: 724-946-6171, Or delivered in person