Dependency Status Appeal
2015-2016

Appeals to Dependency Status:

An appeal may be warranted to your dependency status if an unusual, mitigating circumstance exists between you and your parent(s). This cannot be based on whether your parents want to complete the form or want to provide you with the help to pay for College expenses. It must be based on an unusual situation. Some reasons for an appeal to your dependency status are listed below:

1. Your parent(s) are incarcerated.
2. Your parent(s) live in a war-torn country and you are unable to communicate/correspond with them.
3. Your parent(s) is/are mentally incapacitated.
4. You are estranged from your parent because of an abusive situation that can be documented.
5. Other mitigating circumstance as documented by the applicant.

DEPENDENCY OVERRIDE DOCUMENTATION REQUIRED

2015-2016

1. Student's 2014 1040/1040A/1040EZ Tax Return Transcript
2. Student's Parents 2014 1040/1040A/1040EZ Tax Return Transcript (if filed)
3. Completed Dependency Override Application (attached)
4. Student's written explanation of unusual circumstances

* ***Please attach all documents to the Dependency Override Application***

Revised 04/2015

Virginia Highlands Community College
DEPENDENCY OVERRIDE APPLICATION
2015-2016

Name_____

Student ID_____ **Phone** _____

There are federal requirements that a student must meet to qualify for financial aid as an independent student. If you do not meet one of the criteria, you will be evaluated as a dependent student, meaning that your parents must provide income and asset information. There are circumstances that may warrant re-evaluation of your status. Providing the following information will permit the financial aid administrator to make this determination.

1. a. In 2014 did you live in your parents' home or in a residence owned by your parents? ___yes ___no
   b. In 2015 will you live in your parents' home or in a residence owned by your parents? ___yes ___no

2. a. Did your parents claim you as a dependent on their 2014 federal tax return? ___yes ___no
   b. Will your parents claim you as a dependent on their 2015 federal tax return? ___yes ___no

3. What is the amount of financial support you receive from your parents? _____

4. What other support do you receive from your parents (example: health insurance, room and board while living at home)?

   Please identify type and approximate value. _____

5. If your parents are unwilling to provide their financial information to complete your Free Application for Federal Student Aid (FAFSA), please explain why. _____
   _____

6. Please indicate the amount and the source (example: wages, monetary gifts from persons other than your parents, interest income) of your annual income for 2014 and 2015.

   2014 $_____ _____
   2015 $_____ _____

7. Please complete the following statement of your annual calendar year expenses:

EXPENSES (If any amounts are zero, please explain)	**2014 (January – December)**	**Projected 2015 (January-December)**
Housing		
Food		
Transportation (car payments, insurance, gas, maintenance)		
Utilities		
Child care and/or dependent care		
Personal (clothing, entertainment)		
Other		
TOTAL		

8. Parent Certification:

I (We) will not claim this child as an exemption on our 2014 federal income tax return and will not provide substantial financial support for him/her during the 2015-2016 school year.

I (We) affirm that the information on both sides of this form is correct. I (We) certify that the Financial Aid Office will be notified if circumstances change.

_____ _____
Father's Signature Date

_____ _____
Student's Signature Date

_____ _____
Mother's Signature Date

Written explanation of unusual, mitigating circumstance that exists between you and your parents:

_____
_____
_____
_____

Person(s) other than immediate family who can verify your status as independent of parental support.
Such as a counselor, social worker, doctor, clergy member, etc:

Name _____ Name _____
Phone # _____ Phone # _____

After you have completed this form and have gathered all required documentation, you may call the Financial Aid Office at 276-739-2555 and schedule an appointment to discuss your application for Dependency Status Review.

For Office Use Only

Approval _____ Date _____

Denial _____ Date _____

Comments: