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## 2017-2018 Request for Change in Dependency Status

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Last Name

First Name

MI

SWC ID Number

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### A. Explanation of Process and Standards

Federal law allows schools to exercise "Professional Judgment" to override the dependency status of students in some situations. Generally this can only be approved in circumstances where support of students by parents or contact between students and parents is either impossible or unreasonable to expect.

**Circumstances that *may* warrant a dependency override (including but not limited to):**

- Physical, emotional, or sexual abuse committed by parent(s)
- Criminal neglect or abandonment by parent(s)
- Incarceration or long-term hospitalization of parent(s)
- Permanent loss of contact with parent(s)

**Circumstances that do *not*, in and of themselves, warrant a dependency override (including but not limited to):**

- Refusal or inability of parent(s) to contribute to education costs
- Unwillingness of parent(s) to provide documentation/information requested
- Parent(s) not claiming student as an exemption/dependent on taxes
- Parent(s) residing in another state or country
- Students residing apart from parents and/or being self-supporting

If you believe your circumstances warrant a dependency override, complete this form, attach any required documentation (see below) and submit it to the Financial Aid Office by the deadlines indicated. If your appeal is approved the office will override your FAFSA to allow processing without the inclusion of parent information. This approval is only valid only for Southwestern College and only for the specified academic year.

Note: Being considered independent does not necessarily make you eligible for more financial aid- you may actually have greater aid eligibility if you are dependent. Please be advised that any information submitted with this appeal is strictly confidential and is protected by the Family Educational Rights and Privacy Act of 1974 (FERPA).

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### B. Previous Dependency Override

Were you approved for a dependency override by Southwestern College during the prior academic year? (Check one)

- ☐ **No** (skip to the next section)
- ☐ **Yes** If the circumstances for which you were previously granted an override remain unchanged, attach a signed and dated letter in your own words briefly explaining why you requested an override previously and clarifying whether the circumstances are the same. Skip the rest of the sections below, **sign** at the bottom of the form, and submit with your completed letter.

### C. Support and Income Information

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When was the last time you were in contact with your parent(s)? \_\_\_\_\_

When was the last time your parent(s) provided any form of support? \_\_\_\_\_

Briefly describe your living situation- do you rent or own a house/apartment/condo, do you live alone or with family, roommates, etc.? \_\_\_\_\_

Briefly describe how you now support yourself and pay living expenses: \_\_\_\_\_  
\_\_\_\_\_

### D. Personal Circumstances

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Please provide a written explanation describing why you think your circumstances warrant a dependency override. Make sure to address your relationship with **both** of your biological/adoptive parents, and why you don't feel their income should be considered. Please include the month/year of any relevant events (ex. police interventions, social worker investigations, counseling, when you moved out of parents' house, etc.) **Attach additional pages if necessary.** Information you provide is confidential. \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### E. Affidavit in Lieu of Parents Information

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Have the attached affidavits completed by **at least** one third party who knows you and your family, and who can attest to the circumstances you describe above. If possible, make copies of the affidavit and have it completed by more than one person. Third party affidavits **ideally** will be completed by persons or agencies who interacted with you and your family in a professional capacity (i.e. police, social workers, counselors/psychologists). Having multiple third party documentation from professionals familiar with your circumstances improves the likelihood of your appeal being approved. Submit all completed affidavits with this completed appeal.

### F. Deadlines

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Submit this appeal and attached documentation to the Financial Aid Office as soon as possible to avoid delays, but by no later than the deadlines below. Late appeals may not be approved.

**October 23, 2017**

**For students attending fall only and *not* returning spring**

**March 22, 2018**

**For students attending fall and spring or spring only**

### Certification

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If you are the student by signing this application you certify that all of the information you provided is true and complete to the best of your knowledge and you agree, if asked, to provide additional information that will verify the accuracy of your completed form.

\_\_\_\_\_  
Student Signature Date

**2017-2018 Request for Change in Dependency Status  
Affidavit in Lieu of Parents Information**

Last Name	First Name	MI	SWC ID Number
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The student named above is filing an appeal to be considered independent for financial aid purposes (not having to provide parent income information). If you are able to corroborate their explanation of why providing parent information should not be required, please complete the following information. Please be advised that any information submitted with this appeal is strictly confidential and is protected by the Family Educational Rights and Privacy Act of 1974 (FERPA).

**Declarant's name** \_\_\_\_\_

**Occupation** \_\_\_\_\_

**Phone number/email** \_\_\_\_\_

**What is your relationship to the student?**

- ☐ Counselor/psychologist, clergy
- ☐ Social worker/case worker
- ☐ Investigating/intervening police officer
- ☐ Physician
- ☐ Other (please specify) \_\_\_\_\_

**How long have you known the student?** \_\_\_\_\_

**Please provide a brief statement of your personal knowledge of the student's family history, especially their relationship with their parents. Indicate how you came to be involved with the student and their family. Please address the student's relationship with both biological/adoptive parents, and why you don't feel their income should be required. Please include the month/year of any relevant events (ex. police interventions, social worker investigations, counseling, when student moved out of parents' house, etc.) Attach additional pages if necessary.**

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**Certification**

If you are the declarant by signing this affidavit you certify that all of the information you provided is true and complete to the best of your knowledge.

_____ Declarant Signature	_____ Date
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**2017-2018 Verification Worksheet Independent Student V-1**

The U.S. Department of Education and/or Southwestern College (SWC) selected your application for review in a process called "Verification." In this process, we are required by law to compare information from your FAFSA with the information provided on this form and all requested financial documentation. Corrections may be deemed necessary. ***We cannot process your financial aid until verification has been completed. Please provide the required documents as soon as possible and read all instructions carefully before completing this worksheet to avoid delaying your financial aid awards.***

Last Name

First Name

MI

SWC ID Number

**INSTRUCTIONS:**

Step 1: Collect and attach **ALL** required documentation (see "Required Documentation" below).

Step 2: Complete and sign the form.

Step 3: Make **PHOTOCOPIES** of required documents and submit this form in person to the Southwestern College Financial Aid Office or to any of the Student Services Departments at any of the Higher Education Centers.

**REQUIRED DOCUMENTATION****STUDENT/SPOUSE DOCUMENTATION REQUIRED**

**A. If you or your spouse (if any) FILED taxes for 2015 (or were required to file taxes), please attach:**

- A **PHOTOCOPY** of the 2015 Tax Return Transcript (*a document issued by the IRS*).

**DO NOT SUBMIT** your tax returns (*the original tax document, i.e., 1040, 1040A and 1040EZ, you submit to the IRS*).

- ◇ To order a 2015 Tax Return Transcript online: <http://www.irs.gov/individuals/Get-Transcript>.
- ◇ To order a 2015 Tax Return Transcript by phone: 1-800-908-9946.
- ◇ If you used the IRS Data Retrieval Tool (*transfers tax data to your FAFSA*) successfully when completing your FAFSA online, we **DO NOT** need your or your spouse's (if any) tax transcripts.

----- **OR** -----

**B. Please complete one of the following:**

- If you or your spouse (if any) worked in 2015, but **DID NOT** file taxes, attach a **PHOTOCOPY** of **ALL** 2015 W-2 and/or 1099 forms or IRS Wage and Income Transcript for the person that worked, but did not file taxes.

**OR**

- ☐ Check this box if **NOT** employed and had **ZERO** income from work in 2015.

## A. Family Information

List all of the people in your household in the table below. Include:

- Yourself;
- Your spouse (if any);
- Your children if you will provide more than half of their support from July 1, 2017 through June 30, 2018, or if the children would be required to provide parental information if they were completing a FAFSA for 2017-2018. Include children who meet either of these criteria, even if they do not live with you; **AND**
- Other people if they currently live with you and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2017 through June 30, 2018.

Full Name	Age	Relationship	If this person will be attending college at least half-time from July 1, 2017 to June 30, 2018, please write the name of the college here.
		<i>Myself</i>	<i>Southwestern College</i>

\*If you need more space, attach a separate page with your name and Student ID Number at the top.

## B. Income Information

### STUDENT/SPOUSE INCOME

1. Did you or your spouse (if any) earn any income from employment in the US in 2015?
  - ☐ YES. **Go** to Question 2.
  - ☐ NO. **Skip** to Question 3.
2. Were you or your spouse (if any) required to file a US tax return for 2015?
  - ☐ YES. See the "Student/Spouse Documentation Required" section A for instructions on Page 1. **Skip** to Section C, Certification.
  - ☐ NO. See the "Student/Spouse Documentation Required" section B for instructions on Page 1. **Skip** to Section C, Certification.
3. Did you or your spouse (if any) earn any income from employment in a foreign country in 2015 and either did not file a foreign tax return or filed a foreign tax return?
  - ☐ YES, and did not file a foreign tax return. Indicate amount earned, translated into US dollars, and country earned in: \$\_\_\_\_\_ in \_\_\_\_\_.
  - ☐ YES, and filed a foreign tax return. You **MUST** submit a **PHOTOCOPY** of your or your spouse's (if any) foreign tax return **AND** the SWC Foreign Income Conversion Form (found at [www.swccd.edu/faforms](http://www.swccd.edu/faforms)). Convert all figures to US dollars, using the exchange rate in effect on the day you completed your FAFSA.
  - ☐ NO, my spouse (if any) or I did not earn any income from employment in a foreign country.

## C. Certification

Signing this form certifies that the information reported is complete and correct and that any false statement or failure to provide proof when asked may be cause for delay, denial, reduction or withdrawal of financial aid.

**Warning: purposely giving false and/or misleading information may be cause for a fine, sentence to jail or both.**

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

*Submit this worksheet to the Southwestern College Financial Aid Office or to any of the Student Services Departments at any of the Higher Education Centers. You should make a photocopy of this worksheet for your records.*

**Complete (REQUIRED):** Name \_\_\_\_\_ Student ID Number \_\_\_\_\_