



## 2011-2012 Dependency Status Change Request

Last Name		First Name		MI	G00 Student ID
Street		City	State	ZIP	Phone Number

The Department of Education considers you a dependent student until the age of 24, unless any one of the following situations applies to you:

- You are married;
- You will be working on a master’s or doctorate program at the beginning of 2011-2012;
- You have children who receive more than half of their support from you;
- You have dependents (other than your children or your spouse) that live with you and receive more than half of their support from you, now and through June 30, 2011;
- You are on orphan or a ward of the court, were you in Foster care;
- You are a veteran of the U.S. Armed Forces;
- You are currently serving on active duty in the U.S. Armed Forces for purposes other than training;
- You are an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless.

If you do not meet at least one of the conditions listed above and you were born after January 1, 1988, you are considered a dependent student for financial aid purposes and you must provide your parents financial information on the Free Application for Federal Student Aid (FAFSA). Nonetheless, Federal guidelines allow schools to exercise “professional judgment” in overriding a student’s dependency status in situations the relationship between you and your parent(s) has been compromised in a serious and ongoing way. **Examples of this include, but are not limited to, where you have experienced verbal or physical abuse, abandonment, or where your physical or emotional welfare is jeopardized by continued contact with your parent(s).** The information you share in this form is kept confidential and any documentation you provide can be returned to you upon your request.

**To request an override of your dependency status by the Cañada College, College of San Mateo or Skyline College Financial Aid Office you must submit the following:**

- 1) A letter explaining your circumstances and your current living information
- 2) A letter from a teacher, counselor, medical professional, social worker, or clergy who can verify your situation
- 3) Court Documentation and/or Police Reports
- 4) A copy of your most recent Federal Income Tax Return and/or Student Income Certification Form
- 5) 2011-2012 Independent Verification Worksheet

Check here if you have been approved for a Dependency Override in the previous year. If this applies to you and your situation has not changed from last year, please submit an updated statement.

When was the last time you had contact with your parents? \_\_\_\_\_

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

Did your parent(s) claim you on their federal tax returns in the following years?

2009 Yes No      2010 Yes No

Will they claim you on their federal tax return in 2010? Yes No

**Financial Information**

Are you currently employed? Yes No Monthly Wages: \$\_\_\_\_\_

Please provide Name, Address, and phone number of your current employer:

Do you have other sources of income? Yes No If yes, please explain:

**Housing Information**

Are you paying rent? Yes No If yes, how much do you pay monthly? \_\_\_\_\_

Please provide the name, address, and phone# of the person you pay rent to:

**If your Dependency Override is approved, it will be valid only for the San Mateo County Community College District (SMCCCD) and for the academic year it was approved.** If you choose to attend another college, that college must conduct its own review to make an exception. The other college is not bound by the decision that SMCCCD Financial Aid Office has made. A new request must be completed each academic year.

I certify that the above information is true to the best of my knowledge.

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date

**\*\*Please Note:** All reviews of "override requests are done on a case-by-case basis". Since each case is unique, additional information may be requested in some circumstances.

=====

Office Use Only:

APPROVED    DENIED    NEED FURTHER INFORMATION

COMMENTS:

\_\_\_\_\_  
Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Cañada College  
College of San Mateo  
Skyline College

Telephone 650-306-3307  
Telephone 650-574-6147  
Telephone 650-738-4236