STATE TECH

2022-2023 Dependency Appeal

Student's Name _____

Student's Social Security Number _____/_____/_____

You have notified the Financial Aid Office at State Technical College of Missouri that you wish to be declared an independent student. In order to consider your request for a "Dependency Override" you must complete this form and provide the following documentation:

1. **A personal letter of appeal explaining the reason for your request for a dependency override.**
    The letter should provide as much detail as possible and describe your separation from your parents. You must include the following information:
      * The whereabouts of your biological father and his current living arrangements. Include the last contact you had with your biological father and the frequency of contact with him over the last five years.
      * The whereabouts of your biological mother and her current living arrangements. Include the last contact you had with your biological mother and the frequency of contact with her over the last five years.
      * Information explaining why you cannot provide your parent's financial information on the 2022-2023 Free Application for Federal Student Aid (FAFSA).
      * Your living arrangements over the past five years. For example, provide who have you lived with the last five years and who has provided support to you during this time.

2. **Letters from two individuals who can attest to your situation.**
    These letters should provide as much detail as possible describing your separation from your parents.
      * The first letter should be from a professional individual not related to the student. (For example a counselor, social worker, clergy, police, etc.)
      * The second letter can be from either a professional or non professional.
      * Each letter must include the individual's name, title or position, address, and phone number and must be signed.

3. A signed copy of the student's 2020 Federal tax return.

The following questions should be answered by the student.

1. **Did anyone claim you on their 2020 Federal Tax return?**
    ☐ **No**
    ☐ **Yes. Please list the person's name and relationship to you.** _____

2. **Did anyone claim you on their 2019 Federal Tax return?**
    ☐ **No**
    ☐ **Yes. Please list the person's name and relationship to you.** _____

I certify that all of the information concerning my request for dependency override is correct and complete. If I cannot provide the appropriate documentation to support my request for dependency override, I understand I will be evaluated as a dependent student with my parent's income and asset information on the FAFSA form.

_____   _____
Student signature   Date

Print, complete, and return with supporting documents by uploading to https://finaid.statetechmo.edu/NetPartnerStudent using your State Tech Student Email information under the *Missing Items & Messages* page. You must upload a single PDF or JPEG file with a file size of 25MB or less.

Please allow a minimum of 2-3 weeks for the Financial Aid Office to review and reply to this request.