



Student's Name \_\_\_\_\_ SLU Banner ID Number \_\_\_\_\_  
Last First or SSN \_\_\_\_\_

**2008-2009  
Petition for Dependency Status Override**

**NOTE: You are automatically considered to be independent and do not need to submit this form if any of the following applies:**

- ✓ You were born before January 1, 1985.
- ✓ You will be enrolled in a masters or doctorate degree program in 2008-2009.
- ✓ You were married as of the date you filed your original FAFSA for 2008-2009.
- ✓ You have any 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 and will continue to get that support through June 30, 2009.
- ✓ You are an orphan or a ward of the court, or were a ward of the court until age 18.
- ✓ You are a veteran of the U.S. Armed Forces. \*

\*You are considered a veteran if you (1) have engaged in active duty in the US Armed Forces (Army, Navy, Air Force, Marines, or Coast Guard) or as a member of the National Guard or Reserves who was called to active duty for purposes other than training, or were a cadet or midshipman at one of the service academies, and (2) were released under a condition other than dishonorable, or (3) you are not a veteran but will be by June 30, 2009.

By Federal Law the following conditions are **not acceptable** for consideration for a Dependency Status Override:

- ✓ Parent's refusal to contribute financially to a student's education or provide data for the FAFSA.
- ✓ Parent's refusal to claim a student as a tax exemption.
- ✓ Student's demonstrated self-sufficiency and/or living on one's own.

**NOTE:** For a Student Financial Services Committee to review a student's 2008-2009 Petition for Dependency Status Override, the student must complete and submit this signed document, along with the Requested Documentation as detailed below:

\_\_\_\_\_ 1. **Your custodial parent has died and the other natural parent is still living.** You, however, have neither had contact with nor received any financial support from the living parent for a significant period of time.

**Requested Documentation:**

- ✓ Letter from you explaining the estrangement situation with your parent(s) in detail.
- ✓ A copy of the death certificate for the deceased custodial parent.
- ✓ A letter or statement from an objective third party (legal counsel, counselor, clergy) which supports your claim that you have neither lived with or received financial support from the non-custodial parent for a significant period of time.



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\_\_\_\_\_ 2. **Your family situation is unsafe.** The situation may result from physical abuse, emotional abuse, or drug or alcohol abuse.

**Requested Documentation:**

- ✓ A letter (on official letterhead) explaining the situation in detail from *2 objective third-party individuals* such as a minister, social worker, psychologist, high school counselor, teacher, doctor, lawyer or another counseling professional.
- ✓ A letter from you explaining the unusual circumstance or situation in detail.

\_\_\_\_\_ 3. **Previously married and now divorced/widowed.**

**Requested Documentation:**

- ✓ Copy of divorce decree or death certificate
- ✓ A letter explaining why you believe you should be considered independent.
- ✓ Must show self-sufficiency (income, bills, etc.)

**NOTE:** Please ensure student's name, SLU ID number and/or social security number appears on all submitted documents requested to complete the signed 2008-2009 Petition for Dependency Status Override. Upon completion please submit all documentation to the address below.

**Student Certification:** To the best of my knowledge, all of the information provided with my appeal is complete and correct. Furthermore, I agree to provide additional required documentation, as requested by Saint Louis University.

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_

**FOR OFFICE USE ONLY**

Approved \_\_\_\_\_ Denied \_\_\_\_\_

Comments: \_\_\_\_\_

SFS personnel Signature \_\_\_\_\_ Date \_\_\_\_\_