

DEPENDENCY OVERRIDE FORM

Federal financial aid regulations assume that a student's family has primary responsibility for meeting education costs. If you are considered a dependent student according to the federal financial aid definition, your aid eligibility is determined by using parent income and asset information in addition to your own.

WHAT MAKES A STUDENT DEPENDENT OR INDEPENDENT?

Your student dependency status is determined by the U.S. Department of Education based on your specific questions on the FAFSA. For financial aid purposes, federal regulations have defined an independent student as one who meets **AT LEAST ONE** of the following conditions:

- Born before January 1, 1993;
- Married as of the date the FAFSA was signed;
- Have children who receive **more than half their support** from the student, OR has legal dependents, other than a spouse or children, who live with student and who receive **more than half their support** from the student;
- Attending a graduate level program of study;
- A veteran of the U.S. Armed Forces or have attended a service academy and were released under a condition other than dishonorable;
- Currently serving on active duty in the U.S. Armed Forces (other than for training);
- Emancipated Minor or in Legal Guardianship as determined by the court in his/her state of legal residence;
- Orphan or Ward of Court OR in Foster Care after the age of 13;
- A self-supporting unaccompanied youth who is homeless or at risk of homelessness (as certified by governmental or school agency).

A student who does not meet **ANY** of the above conditions is classified as a Dependent student.

WHAT IS A DEPENDENCY OVERRIDE?

A dependency override occurs when a financial aid administrator exercises professional judgment and overrides the Department of Education's criteria for dependent students. An override may only be granted on a case-by-case basis for students with unusual and exceptional circumstances. These circumstances must show compelling reason for a student to be considered independent rather than dependent.

WHAT CONDITIONS COULD WARRANT A DEPENDENCY OVERRIDE?

The following are some examples of conditions that could warrant a dependency override:

- Documented abandonment
- Parental drug abuse
- Parental mental incapacity
- Physical or emotional abuse
- Severe estrangement from parents
- Parental incarceration

WHAT CONDITIONS DO NOT WARRANT A DEPENDENCY OVERRIDE?

By Federal Law, the following conditions **DO NOT** warrant a dependency override:

- Parents refuse to provide information on the FAFSA application or for verification
- Parents do not claim student as a dependent for income tax purposes
- Parents unwilling or unable to contribute to student's education
- Student demonstrates self-sufficiency
- Student reluctant to request the income information from parents
- Student does not wish to communicate with parents

OFFICE OF FINANCIAL AID

Overton Park / 1930 Poplar Avenue
Memphis, TN 38104-2764
tel: 901.272.5136
fax: 901.272.5134
www.mca.edu

INSTRUCTIONS

You should complete this form if you are considered a dependent student for federal financial aid and believe you have compelling extenuating circumstances which should allow you to be considered an independent student. Return the completed form with the required documentation to the Financial Aid Office. *We understand the sensitive nature of these circumstances; all documentation received by our office will be kept confidential.*

PLEASE NOTE THE FOLLOWING:

- Complete the Free Application for Federal Student Aid (FAFSA) online at fafsa.gov **prior** to completing and submitting the Dependency Override Appeal.
- When submitting your appeal, **you will be required to meet with a financial aid staff member.**
- The determination of whether or not approve a dependency override is made by the Financial Aid Office at Memphis College of Art – not the U.S. Department of Education. All decisions made by the Financial Aid Office on dependency overrides are FINAL and not appealable.

DEPENDENCY OVERRIDE APPEAL PROCESS:

1. **Free Application for Federal Student Aid (FAFSA)**
Complete the FAFSA online at fafsa.gov prior to submitting the Dependency Override Appeal.
2. **Dependency Override Appeal Form**
Complete all sections of the appeal form.
3. **Third-Party Statements**
Provide at least two letters from third-party adult individuals who personally have knowledge of your situation and who can verify your circumstances. **At least one letter (on letterhead) must be from a guidance counselor, physician, social worker, clergy person, or another individual who has been involved in the circumstances in a professional capacity.** All letters must include details as to how the person knows you, how long they have known you, and how they have been involved and/or have first-hand knowledge of your situation.

The individuals submitting letters cannot be related to one another, nor can they reside at the same address. A telephone number and address where the individual can be reached for follow up questions must be included.

4. **Supporting Documentation**
In addition to your appeal form and third-party statements, you must provide the following document with your appeal:
 - Copy of your current lease or rental agreement. If you do not have either, attach a signed statement from your current landlord verifying your tenancy.
5. **Meet with a member of the Financial Aid staff**
Once you have completed the appeal form and gathered your statements and supporting documentation, contact the MCA Financial Aid Office to make arrangements to meet with a staff member and submit your appeal in person.

AFTER FILING THE DEPENDENCY OVERRIDE APPEAL

If your appeal is approved: You will be notified via email and we will submit the override to the Department of Education. Your financial aid will then be packaged based on an independent status.

PLEASE NOTE: additional documents may be required after the override has been processed.

If your appeal is declined: You will be notified via email of this decision. In order to receive a financial aid package, you MUST provide parental financial information and signatures on your FAFSA using the FAFSA website (fafsa.gov).

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 Student's Last Name First Name Social Security Number

 Permanent Home Address

 Local/Campus Address and Local/Campus Phone Number

 Email address

DEPENDENCY OVERRIDE APPEAL

1. PERSONAL STATEMENT

Provide a detailed explanation of the unusual and extenuating circumstances you believe warrant a review of your dependency status. The following must be included:

1. The nature of your relationship with both your mother **AND** father;
2. The location of both parents **AND** when you last had contact with them;
3. The reason why you cannot obtain information and/or support from your parents.

2. THIRD PARTY PROFESSIONAL STATEMENT

Provide at least two letters from third party adult individuals who personally have knowledge of your situation and who can verify your circumstances. Please note the following:

1. At least one letter (on letterhead) must be from a guidance counselor, physician, social worker, licensed therapist, clergy person, or other individual who has been involved in the circumstances in a professional capacity;
2. All letters must include details as to how the person knows you, how long they have known you, and how they have been involved and/or have first-hand personal knowledge of your situation;
3. The individuals submitting letters cannot be related to one another, nor can they reside at the same address. A telephone number and address where the individual can be reached for follow up questions must be included.

3. EXPENSES

Provide answers for the following questions.

Did your parent(s) claim you as an exemption on their 2015 federal tax return?	Yes	No
Will/did you parent(s) claim you as a dependent on their 2016 federal tax return?	Yes	No
Did you parent(s) provide your health insurance in 2016-2017?	Yes	No
Will your parent(s) provide health insurance in 2017-2018?	Yes	No
Did you parent(s) provide your auto insurance in 2016-2017?	Yes	No
Will your parent(s) provide your auto insurance in 2017-2018?	Yes	No

Indicate who pays for each expense.

Rent: _____
 Utilities: _____
 Telephone: _____
 Food: _____
 Transportation (car payment and insurance): _____
 Medical (health insurance): _____

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4. PRIOR YEAR FINANCIAL AID SUPPORT

Did you receive financial aid during the 2016-2017 academic year (Fall 2016, Spring 2017, or Summer 2017)? Yes No

If you answered "Yes," list the institution(s) you attended during the 2016-2017 academic year.

5. STUDENT CERTIFICATION

All information on this form is true, complete, and accurate to the best of my knowledge. I agree to provide any documentation needed to verify this appeal. I understand that purposefully providing false information could result in a reduction and/or repayment of aid, and/or denial of future appeals in this and future years.

Student Signature

Date

PLEASE RETURN THIS FORM AND SUPPORTING DOCUMENTATION:

By Mail:

MEMPHIS COLLEGE OF ART
FINANCIAL AID OFFICE
1930 POPLAR AVENUE
MEMPHIS, TN 38104

By Fax:

(901) 272-5134

In Person:

Financial Aid Office
Gibson Hall