



**MISSISSIPPI STATE UNIVERSITY™**  
STUDENT FINANCIAL AID

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**2017-2018**  
**Dependency Override Appeal**

\_\_\_\_\_  
**Student's Name**

\_\_\_\_\_  
**(9 digit) MSU ID**

Under Federal law your family is primarily responsible for paying for your college expenses. In **very** limited situations Federal law may allow us to consider a dependent student as independent (for financial aid purposes) when unusual conditions exist.

Examples of unusual conditions where you may be unable to provide parental data include:

- Your parents are incarcerated; or
- You have left home due to an abusive family environment; or
- You do not know your parents location, are unable to contact them, and you are not adopted.

Not all situations are considered unusual. The following would **not** be considered valid situations:

- › You do not live with your parents or you are self-sufficient; or
- › Your parents refuse to contribute to your college expenses; or
- › Your parents do not want to provide their information on your FAFSA; or
- › Your parents do not claim you (the student) as an exemption on their income taxes.

**\*\* Verification of your FAFSA information must be completed before adjustments can be made. Check your eligibility requirements on your MSU MyState Portal to see which documents are required for verification. Also, please regularly check your MSU email to see if you need to submit additional documentation.**

**\*\*Incomplete Appeals will be returned and processing time will be delayed**

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**Update on Prior Dependency Override Appeal Approval**

If our Professional Judgment Committee approved a dependency override for you during 2016-2017, please note that you must complete the Dependency Override Appeal form every year, AND submit it with an update letter detailing your current situation.

**Use the checklist below to ensure you have submitted ALL necessary documentation for a dependency override appeal update:**

- Typed and signed personal statement which updates us on the nature of the severe family situation for which the appeal was approved and the current status of the situation (ex. Unchanged, reconciliation has occurred.)
- 2017-2018 Household Verification Form
- 2015 IRS Federal Income Tax Return Transcript (<http://www.irs.gov>)

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**New Dependency Override Appeal**

If any of the following applies to your situation, please indicate below with a check mark. We will need to receive ALL listed information below before the appeal can be considered.

- Death of both parents or death of custodial parent and no contact with non-custodial parent.**

**Required Documentation:**

- Typed and signed personal statement outlining the reason for an appeal, including specific information and dates
- 2017-2018 Household Verification Form
- 2015 IRS Federal Income Tax Return Transcript (<http://www.irs.gov>)
- Copy of death certificates or obituaries
- Copy of student's birth certificate

- I no longer live with my parent(s) due to an unsafe home environment. (This may be due to physical or emotional abuse, drug or alcohol abuse.)

**Required Documentation:**

- Typed and signed personal statement outlining the reason for an appeal, including specific information and dates
- 2017-2018 Household Verification Form
- 2015 IRS Federal Income Tax Return Transcript (<http://www.irs.gov>)
- At **least two signed letters** from third party (non-family member) who can verify your situation from personal knowledge. Professional references must be signed and listed on agency letterhead (law enforcement, guidance counselor, social worker, clergy, etc.) Personal references (non-family member) must be **signed and notarized**.

- Currently not living with parent(s). (This may be due to estrangement, abandonment, incarceration, or mental incapacity.)

**Required Documentation:**

- Typed and signed personal statement outlining the reason for an appeal, including specific information and dates
- 2017-2018 Household Verification Form
- 2015 IRS Federal Tax Return Transcript (<http://www.irs.gov>)
- At **least two signed letters** from third party (non-family member) who can verify your situation from personal knowledge. Professional references must be signed and listed on agency letterhead (law enforcement, guidance counselor, social worker, clergy, etc.) Personal references (non-family member) must be **signed and notarized**.

**Section A: Your Monthly Expenses for 2017:** (attach additional sheet if needed)List *your portion* of your estimated 2017 expenses below:

Your 2017 Expenses	Monthly Expense Amount	Monthly Expense Amount You Pay	Monthly Expense Amount Others Pay (list name and relationship)
<i>Example: Food</i>	200	75	125 (Ann Jones - aunt)
Housing			
Utilities			
Food			
Child Care/Dependent Child Care			
Medical/Insurance			
Personal ( clothing, toiletries, etc)			
Transportation			
<b>Total Monthly 2017 Expenses:</b>	\$	\$	\$

**Section B: Additional Information** (answer all questions below):

Additional Information	Month/Year	Name of Person/Relationship to You
Date you <b>last lived</b> with your parents		
Date you <b>last lived</b> with a relative		
Date you <b>last received</b> financial support from your parents		
Date someone else <b>last claimed</b> you as a tax exemption		

**Certification Statement**

By signing this form, I certify that all of the information on this form and any attachments are complete and accurate to the best of my knowledge. **Warning: Purposely giving false or misleading information may result in a fine, imprisonment, or both.**

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

Date \_\_\_\_\_