



OFFICE OF STUDENT FINANCIAL AID

ROBESON COMMUNITY COLLEGE

Student Center Building 13

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2020-2021 Request for Dependency Override Form

Student's Name: _____ Student ID: _____

Address: _____ City/State/Zip _____

Phone #: _____ Email: _____

There are special circumstances when the *Financial Aid Office* at **Robeson Community College** may exercise discretion to override a student's dependency status.

A student is automatically Independent if he/she:

- The student was born before January 1, 1997
- The student is married as of the date he/she applies
- The student is working on a master's, doctoral degree or graduate certificate program at the beginning of the 2020-2021 school year
- The student is currently serving on active duty for purposes other than training,
- The student is a veteran of the U.S. Armed Forces,
- The student has dependents other than a spouse, who live and receive more than half of their support from you between July 1, 2020 and June 30, 2021
- At any time since you turned age 13, were both your parents deceased, were you in foster care, or were you a dependent or ward of the court?
- The student is an emancipated minor or in legal guardianship as determined by a court in the student's state of legal residence
- At any time on or after July 1, 2019 the student's high school or school district homeless liaison determined that the student was an unaccompanied youth who was homeless or was self-supporting and at risk of being homeless.
- At any time on or after July 1, 2019 the director of an emergency shelter or transitional housing program funded by HUD determined the student was an unaccompanied youth who was homeless or was self-supporting and at risk of being homeless.
- At any time on or after July 1, 2019 the director of a runaway homeless youth basic center or transitional living program determined the student was an unaccompanied youth who was homeless or was self-supporting and at risk of being homeless.

*Students not meeting one of the above criteria are considered **DEPENDENT** by the US Department of Education*

According to the Department of Education, you are **NOT** considered Independent if:

- Your parents refuse to contribute to your education
- Your parents are unwilling to provide information on the FAFSA or for verification
- Your parents do not claim you as a dependent for income tax purposes.
- You demonstrate total self-sufficiency

WARNING: If you purposely give false or misleading information, you may be fined, sent to prison or both.

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STEP 1: Determining Eligibility

The following are unusual circumstance that may warrant a dependency override:

(Please check all that applies)

- ☐ Abandonment by parents
- ☐ Abusive family environment that threatened your health and safety
- ☐ Unable to locate your parents

STEP 2: Supplemental Information and Required Documentation

(Please check which situation best)

Mother	Father	Circumstance	Requested Documentation
<input type="checkbox"/>	<input type="checkbox"/>	Parent is deceased	A copy of each parent's death certificate. <i>If both parents are not deceased, please provide a typed statement addressing the following:</i> <ul style="list-style-type: none"> the whereabouts of living parent the last time you had contact with the living parent Two letters from a professional third party detailing the circumstances surrounding your case. Birth certificate
<input type="checkbox"/>	<input type="checkbox"/>	Parent is incarcerated	Documentation that verifies: <ul style="list-style-type: none"> the parent is incarcerated and lists the parent's anticipated release date. Birth certificate
<input type="checkbox"/>	<input type="checkbox"/>	Abandonment by parents	Two letters from a professional third party (<i>teacher, counselor, medical authority, clergy, prison administrator, government agency or court</i>) detailing the circumstances surrounding your case. Letters from relatives and friends are not acceptable.
<input type="checkbox"/>	<input type="checkbox"/>	Abusive family environment	Two letters from a professional third party (<i>teacher, counselor, medical authority, clergy, prison administrator, government agency or court</i>) detailing the circumstances surrounding your case. Letters from relatives and friends are not acceptable.
<input type="checkbox"/>	<input type="checkbox"/>	Unable to locate parents	Two letters from a professional third party (<i>teacher, counselor, medical authority, clergy, prison administrator, government agency or court</i>) detailing the circumstances surrounding your case. Letters from relatives and friends are not acceptable.

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STEP 3: Required documentation for all requests

1. Attach a typed personal statement detailing the following:
 - a. Whereabouts of your parents
 - b. The last time you had contact with your parents.
 - c. Circumstances surrounding your relationship with both parents
 - d. Why you are requesting a dependency status change.
2. Two letters from a professional third party who can attest first-hand to your extenuating circumstances (*Examples of a professional third party: teacher, counselor, medical authority, clergy, government agency or court*). If letters are not from a professional third party, letters must be notarized.
3. Include any additional documentation to corroborate the situation (police report, medical report, etc.)
4. Complete a **2020-2021 FAFSA** application.
5. Complete a **2020-2021 Independent Verification Worksheet**.
6. If you filed a 2018 federal tax return, attach a 2018 IRS tax return or 2018 tax transcript.
7. If you worked in 2018 but did not and was not required to file a 2018 tax return, attach all of your W-2 forms AND a copy of the “**Verification of Non-Filing Letter**” from the IRS dated on or after October 1, 2019 that confirms a 2018 tax return was not filed.

If your request is **DENIED**, please be prepared to submit a Dependent Verification Form, parent W-2s, parent tax transcript and include parental information on your FAFSA application.

Certification:

I certify that the information is true and correct to the best of my knowledge and belief. I understand that RCC has the right to require additional proof of the information provided on this form. I agree to submitting further documentation if requested.

Student Signature

Date

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