

# UNIVERSITY OF HARTFORD

## 2018-2019 Dependency Override Renewal Application

**What is a dependency override?** A dependency override occurs when a Financial Aid administrator overrides the requirement for parent information due to extreme circumstances, such as documented abuse or abandonment by the parent. A dependency override at the University of Hartford is determined on a case-by-case basis depending on the situation, the supporting documentation provided, and whether the situation is reason enough for a student to be considered independent rather than dependent.

**Dependency Override Applications must be approved yearly.**

Our records indicate that you were granted a dependency override for the prior financial aid award year. In order to continue to process your financial aid application with the same status as the prior year, you must provide the following form attesting to your current situation.

### **A. Student Information:**

Name \_\_\_\_\_ University ID # \_\_\_\_\_

Address \_\_\_\_\_ Date of Birth \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_ Phone \_\_\_\_\_

**B. 2018-2019 FAFSA Status (Check One):**       Already Filed FAFSA       Not Yet Filed

### **C. Certification Statements:**

- Did you resume living with your biological or adoptive parent(s) in the past year or current year?       Yes       No
- Will your biological or adoptive parent(s) or another person claim you as a dependent in 2016?       Yes       No
- Did your biological or adoptive parent(s) provide you with any support in cash or contribute to paying for any part of your college expenses including room and food?       Yes       No
- Have any of the circumstances that were used to determine your original independent status changed?       Yes\*       No  
*\*If yes, please ATTACH an updated Personal Statement regarding the recent changes.*

## CERTIFICATION AND SIGNATURE

By signing this application, I certify that all of the information reported on this application is complete and correct. I hereby certify that all information contained in this request to renew my independent status is true. I swear or affirm that I have not knowingly or intentionally provided any false statements or fraudulent documentation.

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

Date \_\_\_\_\_