



Financial Aid Office  
3300 Century Avenue North  
White Bear Lake, MN 55110

**2009-10 REQUEST FOR  
PROFESSIONAL JUDGMENT  
DEPENDENCY STATUS**

Name \_\_\_\_\_

Student ID# \_\_\_\_\_

Addr \_\_\_\_\_

City, State, Zip \_\_\_\_\_

I am requesting the Financial Aid Office to consider:

**CHANGE OF DEPENDENCY STATUS TO INDEPENDENT:** A student who does not meet the federal criteria for independent status as listed in the FAFSA may have his/her dependency status changed IF he/she has special circumstances.

To apply for a dependency status change, **provide the following documentation:**

- A detailed statement explaining why you are unable to provide parental information including the last time you lived with your parents and/or received any financial support from them and how you were able to meet your financial obligations, and
- A written statement from **two** individuals (i.e. school administrator, minister, social worker, counselor) who have firsthand knowledge of your situation.

**NONE OF THE FOLLOWING CONDITIONS, SINGLY OR IN COMBINATION, WILL QUALIFY FOR A DEPENDENCY OVERRIDE AND, IF SUBMITTED, WILL BE DENIED:**

1. Parents refuse to contribute to child's education
2. Parents are unwilling to provide information on the application or for verification
3. Student demonstrates self-sufficiency

**Note: All requests submitted without proper documentation will be denied.**

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

**OFFICE USE ONLY**

\_\_\_\_\_ Approved    \_\_\_\_\_ Denied    \_\_\_\_\_ Tabled – need more information:

**Comments:**