



Office of Student Financial Aid

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DEPENDENCY OVERRIDE 2021-2022 Award Year

Student Name: _____ Student ID#: _____

The U.S. Department of Education determines a student's status for receipt of financial aid as dependent or independent by the answers the student provides to the questions listed in **Section 2** of the **Free Application for Federal Student Aid (FAFSA)**. The federal student aid programs are based on the premise that the family [parent(s)] is considered the primary source of the student's financial support for a college education and financial assistance is meant to supplement, not supplant, the family's ability to pay.

The Higher Education Act allows financial aid administrators to make dependency overrides on a **case-by-case** basis for students with **unusual circumstances**. A justifiable reason to excuse parents from the student's financial responsibility must exist and appropriate documentation must be provided to the Office of Student Financial Aid (OSFA). However, **none of the conditions listed below will qualify as unusual circumstances** and therefore, are not sufficient reasons for determining a student's status as independent and will not be a dependency override:

- Student's parent(s) refuses to contribute to the student's educational costs;
- Parents are unwilling to provide information on the FAFSA or for verification;
- Parents do not claim the student as a dependent for income tax purposes;
- Student demonstrates total self-sufficiency

The following information covers the procedure that is used to determine a student's eligibility for a "Dependency Override". The OSFA will review the student's request for an override by examining the supporting documentation provided by the student and, using professional judgment, will either approve or deny the student's request. The student will be notified of the decision.

PLEASE NOTE: IN ACCORDANCE WITH FEDERAL REGULATIONS, THE OSFA'S DECISION IS FINAL AND CANNOT BE APPEALED TO THE U.S. DEPARTMENT OF EDUCATION.

SECTION I: CIRCUMSTANCES GIVEN CONSIDERATION

- A student's voluntary or involuntary removal from their parents' home due to an extreme situation that threatened the student's health and/or safety and due to these conditions, parental support was terminated.
- Incapacity of parent(s) such as incarceration, mental or physical illness or the inability of the applicant to locate the parent(s).
- Other extenuating circumstances that can be sufficiently documented.

SECTION II: REVIEW PROCEDURES

- An official notification of the OSFA's decision will be emailed to the student; and, if applicable, an explanation of any further actions necessary to complete the student's application for financial aid.

SECTION III: RENEWAL OF A DEPENDENCY OVERRIDE FOR FUTURE YEARS

A dependency override is granted on a yearly basis. Therefore, a student who has been granted a Dependency Override in the previous academic year must re-affirm each subsequent year. Reaffirmation is completed on page 3 of this form. As such, the OSFA may request documentation from the student regarding the student's current dependency status each award year.

To be considered for a "Dependency Override" for the first time, complete page 2 and submit the form along with the required documentation to the OSFA.

To be considered for a "Dependency Override Renewal", complete page 3 and submit the form to the OSFA.

DEPENDENCY OVERRIDE REAFFIRMATION 2021-2022 Award Year

In the previous academic year, a thorough review of your prior mitigating situation by the Office of Student Financial Aid (OSFA) resulted in your dependency status being changed from dependent to independent. In accordance with Federal regulations, the OSFA is required to confirm each year that your extenuating circumstances for a "dependency override" can be approved again for the current 2021-2022 award year.

Please review the reaffirmation statement below. If the previous circumstances upon which your dependency appeal was approved still exist, please complete and sign this form and return it to the OSFA.

I, _____, reaffirm that the extenuating
(Print Student Name)

circumstances that I cited in my previous appeal for independent status are still in existence today and my situation remains the same.

Student's Signature

Date

Student's UTEP email

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

For Office Use Only: Approved _____ Not Approved _____ Date _____ Initials: _____