



Student Name: _____

WIN: _____

-- Please Print Legibly in Blue or Black Ink Only --

DEPENDENCY OVERRIDE APPEAL

Appeal is for (circle semester/s): Summer II Fall Spring Summer I Year: _____

Street Address _____

City, State, Zip _____ Daytime Phone Number (_____) _____

- **You are automatically considered to be independent and do not need to submit this form if you are able to answer “yes” to any of the questions in Section 2 of the on-line FAFSA or Step Three of the paper FAFSA.**

Proving self-sufficiency and/or living on your own are not adequate reasons for changing the dependency status and **will not be considered** as an appealable circumstance. However, if there is an unintentional, involuntary, and uncontrollable break in the relationship between parents and student, WMU may be able to consider you an independent student. **To make that determination we will need a detailed written explanation and supporting documentation that must be received in our office at least 30 days prior to your last date of enrollment for the current academic year.**

If one of the circumstances **on the other side of this form** applies to you, please check the category, attach required documentation along with a **SIGNED COPY OF YOUR MOST RECENT FEDERAL TAX RETURN** and submit these documents to:

Western Michigan University
Student Financial Aid
1903 West Michigan Avenue
Kalamazoo, MI 49008-5337

Financial Services Specialists will review your appeal based on the documentation submitted and notify you of the results.

**APPEALS SUBMITTED WITHOUT REQUIRED DOCUMENTATION
WILL BE RETURNED TO YOU AS DENIED.**

Student Name: _____ Student WIN. #: _____

1. **Your custodial parent has died and the other natural parent is still living.** You, however, have neither had contact with nor received any financial support from the living parent for a significant period of time.

Required Documentation:

- ✓ Letter from you explaining the situation in detail.
- ✓ A copy of the death certificate for the deceased custodial parent.
- ✓ A letter from an objective third party which supports your claim that you have neither lived with nor received financial support from the noncustodial parent for a significant period of time.

2. **Your family situation is untenable.** The dysfunction may result from physical abuse, emotional abuse, or drug or alcohol abuse. In many cases, a professional counselor has counseled you to live apart from your parent(s).

Required Documentation:

- ✓ A letter (**on official letterhead**) explaining the situation in detail from a minister, a social worker, a psychologist, a high school counselor, a teacher, a doctor, or another counseling professional.
- ✓ A letter from you explaining the situation in detail.
- ✓ One or more of the following:
 - A letter, preferably from someone other than a relative or a friend (i.e. – the parents of a friend of the student, a neighbor, an employer)
 - Police reports
 - Court reports
 - Documentation from a social agency.

3. **You will be giving birth to a child during the academic year**

Required Documentation:

- ✓ Birth certificate.
- ✓ Documentation that 50% or more of the support for this child will be provided by you
- ✓ Documentation from your parents/parents of noncustodial parent of the child noting no support will be provided to you for the child.

4. **Other unusual circumstances.**

Required Documentation:

- ✓ A detailed written explanation and substantiating documentation of other unusual circumstances.

To the best of my knowledge, all of the information provided with my appeal is complete and correct.

Student's Signature _____

Date _____