



**Office of Financial
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2020-2021 DEPENDENCY OVERRIDE FORM

Students who do not meet the federal criteria to be considered independent based on the 2020-2021 Free Application for Federal Student Aid (FAFSA) may submit this form with supporting documentation for review to determine if unusual circumstances exist for granting a dependency status override. Dependency overrides are reviewed on a case-by-case basis for students with extenuating circumstances and are evaluated each award year.

Last Name	First Name	EMPLID #
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The following are circumstances that will **NOT** be considered:

- Parent(s) refusal to contribute to the student's education;
- Parent(s) did not claim student on their tax returns;
- Parent(s) unwillingness to provide information on the FAFSA;
- Student demonstrates total financial self-sufficiency.

PLEASE CHECK THE BOX THAT BEST DESCRIBES YOUR CIRCUMSTANCES:

☐

A severe situation exists in your family, which prevents you from obtaining your parents' information such as abandonment, physical/mental abuse, parental drug or alcohol abuse or any other extenuating circumstances beyond your control.

Documents required for the review:

Personal Statement by Student

- Please submit a typed personal statement thoroughly detailing your circumstances. Your statement must include:
 - The last date you had any form of contact with your mother and father as well as the nature of that contact,
 - Your parents' (mother and father's) full name and location(s) and
 - Explain how you have been **supporting yourself**.

Third Party statement from a Professional

- Please attach a letter from a third party (e.g. Social Worker, Teacher or Clergy Member) explaining your circumstances and knowledge concerning your relationship with your parents. This letter should also include the date you lost contact with your parents and their current knowledge of your dependency status. (Letter must be typed on a letterhead and **cannot be from a friend or relative**.)

PLEASE ANSWER THE FOLLOWING QUESTIONS:

1. Where do you currently live (address)? _____
2. What is your mother's full name? _____
3. What is your mother's current (or last known) address? _____

4. When was the last time you had any contact or communication with your mother (month/year)? _____
5. Describe the events that led to the separation between yourself and your mother:
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
6. What is your father's full name? _____
7. What is your father's current (or last known) address? _____
8. When was the last time you had contact or communication with your father (month/year)? _____
9. Describe the events that led to the separation between yourself and your father:
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
- _____
10. When did you stop living with your parents (month/year)? _____
11. Who did you live with once you stopped living with your parents? _____
12. Who are you currently living with? _____
13. Did you work in 2018? Yes___ No___ If no, explain how you supported yourself in 2018:
- _____
14. Are you currently working? Yes___ No___ If no, explain how you are currently supporting yourself:
- _____

Note: You must first complete your 2020-2021 FAFSA before you can submit a Dependency Override. You may also attach any additional documents which may demonstrate your need for this override.

Certification and Signature(s)

By signing this form, you certify that all of the information you provided is true and complete to the best of your knowledge and you agree, if asked, to provide information that will verify the accuracy of your completed form.

Student's Signature: _____

Date: _____

For Administrative Use Only

Reason for granting/denying request for Dependency Override:

☐ Approved ☐ Denied

FAA Signature: _____

Date: _____