



2024-2025 Dependency Override Appeal Form

STUDENT NAME: _____ ID # _____

Unmarried students who are under the age of 24 are required to provide parental data on the Free Application for Federal Student Aid (FAFSA). They are referred to as dependent students. However, dependent students with “unusual and unavoidable circumstances,” may appeal to the Student Financial Services Office for a dependency override. A dependency override would allow the student to be considered an independent student (for financial aid purposes only) and exempt the student from providing parental data on his/her FAFSA.

According to the Department of Education, the following circumstances would **not** be considered for a dependency override

- ✗ Parents or stepparents refuse to contribute to student’s education.
- ✗ Parents or stepparents are unwilling to provide information on the FAFSA or for federal verification.
- ✗ Parents or stepparents do not claim the student as a dependent or exemption for income tax purposes.
- ✗ Student demonstrates total self-sufficiency.

A Dependency Override Appeal form is considered on a case-by-case basis depending on the situation and the supporting documentation provided. For a situation to be considered as an unusual circumstance and a possible basis for a dependency override, it must belong in one of the following categories:

- ✓ An abusive family environment
- ✓ Abandonment and/or estrangement by parents
- ✓ Incarceration or institutionalization of both parents
- ✓ Parents cannot be located

Please indicate the qualifying reason you are submitting a Dependency Override Appeal:

- | | |
|---|---|
| <input type="checkbox"/> <i>Incarcerated parent(s)</i> | <input type="checkbox"/> <i>Parental drug use</i> |
| <input type="checkbox"/> <i>Physical or emotional abuse</i> | <input type="checkbox"/> <i>Custodial parent deceased</i> |
| <input type="checkbox"/> <i>Documented abandonment</i> | <input type="checkbox"/> <i>Homeless or At Risk of Homelessness</i> |

Documentation submitted to support your case must be as specific as possible and should focus on your relationship (or lack thereof) with your parents/stepparents, not on the lack of parental financial support.

Please submit the following documentation with this appeal form:

- A typed, detailed letter explaining in your own words your unusual circumstances.
- Two (2) letters of support from non-relatives (e.g., proprietor, employer, counselor, social worker, teacher, or clergy), which can confirm the circumstances in your letter of explanation.
 - The letters of support should also include how and for how long they have known you. All letters need to be provided on business letterhead from the organization attesting to your circumstances.
- Any official and/or legal documentation you have to support your claims (e.g., police reports, school records, restraining orders).
- Proof of current residency. This can be a utility bill, cable bill, medical/high school records.
- All other documentation that you believe will help demonstrate your independent status. Supporting statements from any party should be provided on business letterhead or notarized if a personal statement.
- If selected for federal verification, your dedicated financial aid counselor will contact you for a few additional forms.









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ID # _____

Dependency Override Process

-  Students must complete and return the Dependency Override Appeal Form and supporting documentation to the Student Financial Services Office. Please email this completed form and documentation to your dedicated financial aid counselor using the subject line "Dependency Override Appeal". Below you can find your counselors contact information as assigned by last name.
-  Appeals will be reviewed on a case-by-case basis and all information will be kept confidential.
-  The submission of an appeal does not guarantee appeal approval. Additional documentation may be requested.
-  Requests for follow up documentation will be sent to the student's Iona email.
-  The Student Financial Services Office will notify students via their Iona University e-mail the result of their Dependency Status Appeal.
-  Please note students with unusual circumstances that qualify for a dependency override will be deemed an independent student for the aid year. This process must be completed each year you plan to enroll.

Below is the contact information for your dedicated financial aid counselor assigned by last name:

A-F	Leandra Dominguez	914-633-2441	ldominguez@iona.edu
G-O	Nancy Wilder	914-633-2106	nwilder@iona.edu
P-Z	Jennifer Connolly	914-633-2030	jconnolly@iona.edu

Please indicate a best email and telephone number at which the Student Financial Services Office can reach you to discuss any questions related to your appeal.

Email _____ Telephone # () - _____

By signing, I am certifying that this request is subject to the professional judgment of the Student Financial Services Office at Iona University. This request may be subject to further documentation. **ALL DECISIONS ARE FINAL** and cannot be appealed to the U.S. Department of Education.

STUDENT NAME (PRINT) _____ ID # _____

STUDENT SIGNATURE _____ DATE: _____

WARNING: If you purposely provide false or misleading information, you will be reported to the U.S. Department of Education where you may be fined, sent to prison, or both.

OFFICE USE ONLY

Approved _____	Denied _____	Trans #: _____	Notice Sent: _____	FAA Initials: _____	Date: _____
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