

PETITION FOR DEPENDENCY OVERRIDE

INSTRUCTIONS

Use this form only if you are required to report parent information but have a special circumstance that prevents you from obtaining the required information.

- ☐ Complete the following information.
- ☐ Upload this completed and signed form using the Financial Aid Office Secure Document Upload Form at, tinyurl.com/valenciafasubmit
- ☐ The Office of Financial Aid Services may ask for additional information.
- ☐ If you have questions about verification, visit our Virtual Answer Center or schedule an appointment, valenciacollege.edu/students/answer-center

SECTION I.

STUDENT NAME

VALENCIA COLLEGE ID (VID)

HOME PHONE (including area code)

ATLAS EMAIL

REQUIRED DOCUMENTS

The following documentation must be attached to this form:

1. **Signed detailed letter explaining your unusual circumstances.** Be sure to answer the following:

- ☐ Why are you unable to use your biological or adoptive parents' information on the FAFSA?
 - ▶ Be sure to explain why for both your mother and father.
- ☐ When is the last time you had contact with your parents?
- ☐ Why do you no longer have contact with your parents?
- ☐ Where have you been living and how are you supporting yourself?
- ☐ Is there any legal documentation (guardianship/custody/police or court documents) related to your situation?

2. **Submit proof of your circumstances.** Submit two or more of the following items:

- ☐ **Signed notarized letters** from third parties (non-relatives) who have direct knowledge of your situation.
- AND/OR
- ☐ **Signed professional letters on letterhead** from your teacher, counselor, medical authority, Department of Children and Families/government agency, member of the clergy (i.e., minister) or court. This can include legal documentation such as guardianship or custody.
 - ▶ All third party and professional letters must address why you have no contact with your biological or adoptive parents and their knowledge of the situation.
 - ▶ All letters should be dated and include a description of their relationship to you and a telephone number where can be reached.

If you fail to attach the above items, no action will be taken on your request. Allow at least four weeks for the Financial Aid Committee's decision. You will be notified of the results by your Atlas email.

SECTION II.

I certify that the above information and the attachments provided are accurate representations of my circumstances. I understand that providing false or deliberately misleading statements is a violation of federal law and may result in a prison sentence, fines, or both.

STUDENT SIGNATURE

DATE

INTERNAL USE ONLY: Petition for Dependency Override would satisfy requirement: **DEPOVR**