

### Professional Judgement Dependency Override Questionnaire

Name: \_\_\_\_\_ Telephone: (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_  
Student I.D. #: \_\_\_\_\_ Date of Birth: \_\_\_\_ / \_\_\_\_ / \_\_\_\_  
Street Address: \_\_\_\_\_  
City, State, Zip: \_\_\_\_\_

For Title IV Financial Aid, most undergraduate students who are not married and under the age of 24 are considered **dependent** for determining federal financial aid. If, after answering the personal/other/unusual circumstances questions on the FAFSA, you are classified as a dependent student and you have extenuating circumstances that you believe warrant an exception to the requirement to include parental information on your application, you may submit a request for a **Dependency Override** to the Financial Aid Director at your campus.

#### **Please note the following:**

- 1. Student reluctance to request income information from parents is not justification for Dependency Override.**
- 2. The unwillingness of the parents to pay or provide information is not a valid reason for Dependency Override.**
- 3. In all cases, independence from parents must have occurred out of necessity rather than choice.**
- 4. A student who demonstrates total self-sufficiency is not valid reason for Dependency Override.**
- 5. Student's parents living in another country does not qualify as an unusual circumstance.**
- 6. Parents who do not claim the student as an income tax exemption is not justification for a dependency override.**
- 7. A successful petition for a Dependency Override depends on the information and documentation provided by the student. Please be specific and submit comprehensive information to substantiate your claim.**

#### **Instructions**

- To request a Petition for Dependency Override, you must sign and submit this form, along with the following other documentation:
  - Complete the attached form or write a personal letter stating your unusual circumstances. Be sure to include the following: the cause(s) that you became independent from your parents, the date(s) these circumstances arose, the location of, and the amount of contact with both mother and father, and how you have provided for your own basic necessities (shelter, food, clothing, transportation, medical care, etc.). Attach appropriate supporting documentation.
    - If official court documents exist, explaining current circumstances, no additional support documentation is required.
  - Submit at least one letter from a third party** who has personal knowledge of your situation and who can verify your circumstances. The letter, written on official letterhead, should be from a school guidance counselor, physician, social worker, clergy person, or another individual who has been involved in the circumstances in a professional capacity. All letters must include an address and preferably a telephone number where the individual can be reached for follow up questions, if needed.
  - A FAFSA (Free Application for Federal Student Aid) must be completed and submitted to the Department of Education prior to the evaluation of any Professional Judgment applications.
  - You will need to submit this completed and signed form and your supporting documentation by uploading to BerkBox OR making an appointment with a Financial Aid Advisor, either in person at a campus or remotely.
- You will receive notification of the outcome of your Petition for Dependency Override within two weeks of submission. The decision of your campus Financial Aid Director is final and may not be appealed.

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Student ID #



FAA INTERVIEW  
FOR DEPENDENCY APPEAL  
(To be completed by a Financial Aid Administrator)  
(For FA office use ONLY – NOT For Student to complete)

Whereabouts of father: \_\_\_\_\_

Whereabouts of mother: \_\_\_\_\_

What is student's means of support: \_\_\_\_\_

Number of months/years student been living on his/her own: \_\_\_\_\_

Does student receive financial assistance from anyone else: \_\_\_\_\_

If so, from whom and amount per month/year: \_\_\_\_\_

\_\_\_\_\_

Other pertinent information: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Financial Aid Administrator

\_\_\_\_\_  
Date

PROFESSIONAL JUDGEMENT  
DEPENDENCY OVERRIDE DECISION  
(To be completed by FA Director/Designee)  
(For FA office use ONLY – NOT For Student to complete)

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Student ID #

[  ] I am denying this request to consider the student as Independent for the purpose of determining eligibility for Title IV financial aid for the 20\_\_\_\_ year. The reason for my decision is noted below:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

[  ] I am using Professional Judgment to approve this request to consider the student as Independent for the purpose of determining eligibility for Title IV financial aid for the 20\_\_\_\_ year. Student request, dependency appeal information and supporting documentation are attached.

\_\_\_\_\_  
Financial Aid Director

\_\_\_\_\_  
Date