



Office of Financial Aid
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Dependency Override Appeal

Student Name: \_\_\_\_\_ MHCC ID Number: \_\_\_\_\_ Award Year: \_\_\_\_\_

The Department of Education determines student dependency status based on the premise that the family is the first source of a student's support. Clear guidelines are given to help determine whether a student is to be considered independent of parents for financial aid eligibility or whether they are considered dependent. If you are a dependent student, but are unable to provide parent income information on the FAFSA, you may be eligible to apply for a Dependency Override Appeal.

Please review all of the information below to determine whether you are eligible to appeal and, if so, please submit all required documentation or your request will NOT be reviewed. Requested documentation must be submitted to the Office of Financial Aid via email, fax, or mail (see contact information above).

Submission of this appeal does not guarantee a change of dependency status or an increase to your award. Appeals are reviewed regularly and you will be notified of the result by a Financial Aid Advisor. Please allow up to two weeks for review of your Dependency Override Appeal. \*\*Only one appeal may be submitted per award year\*\*

A. ELIGIBILITY FOR DEPENDENCY OVERRIDE

The Office of Financial Aid at MHCC may override dependency status on a case-by-case basis for students with unusual circumstances.

Unusual circumstances DO include:

- Abandonment by parents
An abusive family environment that threatens your health or safety
Inability to locate or contact your parents

Unusual circumstances DO NOT include:

- Parents refuse to contribute to your education
Parents are unwilling to provide information on the FAFSA or for verification
Parents do not claim you as a dependent for income tax purposes
You demonstrate total self-sufficiency

B. REQUIRED DOCUMENTATION

If your situation involves an unusual circumstance such as those described above, you may appeal your dependency status by submitting the following documentation:

- A typed personal letter of explanation describing your unusual circumstance as related to BOTH parents and identifying your current means of support.
Third party documentation verifying your situation. This may be a signed letter on professional letterhead or other official documentation, such as a signed court order. Acceptable third parties include a teacher, counselor, medical authority, clergy member, prison administrator, social worker, lawyers, government agency, or court. The third party should be familiar with your situation.

I certify that all information reported in this appeal and accompanying documentation is complete and accurate to the best of my knowledge and ability. I understand that any false statement or misrepresentation may be cause for reduction and/or repayment of federal, state or institutional financial aid. I also agree to provide additional documentation of the information provided, if requested by the Office of Financial Aid.

NOTE: Only a handwritten signature will be accepted. Digital signatures will NOT be accepted.

Student Signature

Date