

APPEAL FOR DEPENDENCY OVERRIDE 2023-24 School Year

Student Name _____ ID Number _____

Address _____
City, State _____ Zip Code _____

Telephone Number: _____ E-mail Address: _____

Completion of this form does not guarantee a student to be granted Independent status for the current Financial Aid school year. (The Financial Aid Office will need to review this form and the supporting documents before making a determination.)

Dependency overrides are intended for students who have exceptional circumstances, and will be reviewed on a case-by-case basis to determine if individual students have special circumstances that warrant a Dependent Override from dependent to independent status for Financial Aid purposes.

- We cannot approve requests for students whose sole reason for the request is because their parents (or adopted parents) are unwilling to provide parental information, or for students who have chosen to live on their own.

Examples of exceptional circumstances:

- an abusive (emotionally or physically, unhealthy, or unsafe home environment
- abandonment of the student by the parent(s)
- removal or relocation of the student from the parent(s) home by court order; and/or
- other unusual or extraordinary circumstances, events, or incidents you may want us to review

Follow the Steps below, and submit the required information listed:

Step 1: Reason for Appeal: _____

Step 2: Submit a Signed/Dated Personal Statement

Attach a signed/dated statement that explains in detail the extreme, unique and/or unusual family circumstance(s) that prevents you from obtaining and providing your parents' information for your financial aid application. Include:

- A history of events with dates
- Explain how these events led to the eventual deterioration/dysfunction in the parent/child relationship between you and your parent(s)
- Describe your current relationship (even if non-existent) with your parent(s)

Step 3: Submit Additional Documentation

- ▶ Independent 2023-24 V1 Verification Worksheet and all required documents to complete the verification process
- ▶ Submit **three** signed/dated letters substantiating and documenting the existence of your unusual circumstance.
 - Two of these letters must be on letter head from a professional (counselor, therapist, doctor, member of the clergy, social worker, etc.). They should be knowledgeable about your family situation and can verify the reason you are unable to provide your parents' information.
 - The third letter can be from another person having comprehensive knowledge regarding the existence of your unusual circumstances. (Make sure the person's name, address and phone number appear on the letter.)

Step 4: Read and Sign

Please note:

- If your appeal is incomplete or submitted without the necessary documentation, processing of your appeal will be delayed until the additional information is obtained.
- Submission of an appeal does not guarantee your request will be approved.
- If approved, the dependency override is valid for only one academic year. Approval in one year does not guarantee approval in subsequent years. Your status must be reassessed each academic year.
- You will be notified by email regarding the outcome of your dependency override request.
 - A. If your appeal is accepted, the override will be submitted to the Department of Education, and you will receive a Student Aid Report (SAR) reflecting your independent status. An award letter will then be processed and mailed to you.
 - B. If your appeal is not accepted, the MATC Financial Aid Office will notify you via email.

STUDENT CERTIFICATION:

I certify that the information provided on this form is true and correct. I also understand that it will be used to override federal regulations regarding my dependency status. I fully understand that to falsify any information on this form in order to receive Federal Title IV funds is a federal offense and can be punishable by a fine, imprisonment, or both.

I understand that if my situation changes in any way, if I move back with my parents or receive any kind of support from them, that I must report this information to the Financial Aid Office. I understand that by signing this form, I authorize the Financial Aid Office to contact my third-party reference and verify any information supplied on this form.

Signature _____ Date _____

2023-2024 Verification Worksheet

Independent Student – Tracking Group V1

Your 2023–2024 Free Application for Federal Student Aid (FAFSA) was selected for review in a process called verification. The law says that before awarding Federal Student Aid, we may ask you to confirm the information you reported on your FAFSA. To verify that you provided correct information the MATC financial aid office will compare your FAFSA with the information on this worksheet and with any other required documents. If there are differences between your FAFSA application information and this worksheet and/or documents you submitted, MATC will send corrections electronically to the federal processing center to have your application reprocessed. The MATC financial aid office may ask for additional information.

A. INDEPENDENT STUDENT'S INFORMATION (Please print)

Student's Last Name	Student's First Name	Student's M.I.	Student's ID Number
Student's Street Address (include apt. no.)			Student's Date of Birth
City	State	Zip Code	Email Address
Student's Home Phone Number (include area code)			Student's Alternate or Cell Phone Number

B. FAMILY INFORMATION

Number of Household Members: List below **ALL** of the people in your (the student's) household for whom you provide more than half their support. Include:

1. **Yourself.**
2. **Your spouse** (unless you are legally separated and your spouse lives at another address).
3. **Your dependent children** if you provide more than half of their support and will continue to provide half of their support from July 1, 2023, through June 30, 2024.

Number in College: Include in the space below information about any household member who is, or will be, enrolled at least half time in a degree, diploma, or certificate program at an eligible postsecondary educational institution any time between July 1, 2023, and June 30, 2024, and include the name of the college.

NOTE: You may be asked to provide additional documentation if we have reason to believe that the information regarding the household members is inaccurate.

Full Name of Everyone in the Household	Age	Relationship to Student	College Planning to Attend in 2023-24
		SELF	Milwaukee Area Technical College

If there are additional household members, add them on a separate sheet of paper and submit along with this worksheet.

Printed Student Name _____

Student ID Number _____

C. STUDENT (& SPOUSE, IF MARRIED) INCOME INFORMATION:

Check one below and then complete the grid below even if the amount is zero dollars:

- Check here if you and/or your spouse filed 2021 taxes and used the IRS Data Retrieval Tool to complete the FAFSA, and if you did not make changes to the FAFSA fields after the retrieval tool was used.
- Check here if you and/or your spouse filed 2021 taxes and have attached a Federal Tax Return Transcript (and a signed copy of the 1040X if amendments were made after filing).
- Check here if you and/or your spouse will not file and are not required to file a 2021 Federal Tax Return. In the table below, list your employer(s) as well as any income received in 2021. **If you did not file taxes for 2021, you MUST submit your 2021 Wage/Income Transcript, which you may request from the IRS.**

IRS Tax Transcripts, Letters of Non-filing, and Wage & Income Transcripts may be requested at <https://www.irs.gov/individuals/get-transcript> or by phone at 1-800-908-9946. The Milwaukee IRS Office is located at 211 West Wisconsin Ave. To schedule an appointment, please call 1-844-545-5640.

Employer's Name	2020 Amount Earned	IRS W-2s Attached (Y/N)

D. STUDENT MUST SIGN THIS WORKSHEET

The student by signing this worksheet certifies that all of the information reported on it is complete and correct. The student must sign and date. (Electronic Signatures are not acceptable.)

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail or both.

Student's Signature

Date