



SOUTHERN UNIVERSITY AT NEW ORLEANS
Office of Student Financial Aid
6400 PRESS DRIVE
ADMINISTRATION BUILDING ROOM 164
NEW ORLEANS, LOUISIANA 70126
OFFICE NUMBER: (504) 286-5263
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DEPENDENCY OVERRIDE REQUIREMENTS: 2018-2019 PROFESSIONAL JUDGMENT

According to the Federal Application, in order to automatically be classified as an independent student, you must meet specific Federal requirements that are outlined in Section 2 of the Free Application for Federal Student Aid (FAFSA). The U.S. Department of Education realizes that students experience extenuating circumstances that requires the re-evaluation of their dependency status. In order to request re-evaluation of your status to be considered an independent student, you must provide documentation to support your request to the Office of Student Financial Aid. The documents you submit will be evaluated by your financial aid counselor and/or the Professional Judgment Committee. Please note that self-sufficiency is not in itself an acceptable reason for a "Dependency Override". The U.S. Department of Education has directed schools under section 480(d) (7) of the HEA to use Professional Judgment for "Dependency Override" only if a student meets one of the following unusual circumstances:

- **Abandonment by Parents OR**
- **Danger of Abuse (Either Mental or Physical)**

The required documents to support a "Dependency Override" and instructions are as follows:

- Complete the 2018-2019 Free Application for Federal Student Aid (FAFSA) if the application has not been filed.
- Dependency Override Requirements Form (this sheet).
- A signed detailed letter from you (the student) outlining your unusual circumstances, including how you plan to support yourself and your educational efforts without the support of your parents.
- At least one detailed letter (**on letterhead**) from a professional such as a teacher, guidance counselor, doctor, lawyer, or minister explaining and supporting your claim. The letter must supply first-hand detailed information concerning your situation. The letter must provide a signature and contact information, including an -email address and telephone number.
- At least two letters from other adults such as a relative: Grandparent, aunt, uncle, adult sibling or person who can supply first-hand detailed information about your situation. The letters must provide their signatures and contact information, including an email and telephone numbers.
- Copies of legal documents that support your unusual circumstances.
- Verification Documents/Forms: Independent Verification Worksheet, your 2016 Federal Tax Transcript and your 2016 W-2 form(s).
- Copies of your Lease and Utility Bills. **IN ADDITION**, any other documents that you feel are pertinent to your case.
- All documents must be submitted in one packet **along with this form** signed and dated by the student.

*The Financial Aid Counseling staff reserves the right to request additional documentation.
Request for "Dependency Overrides" must be resubmitted each academic year.*

TO BE COMPLETED BY THE STUDENT:

I, _____ (· PLEASE PRINT) ATTEST THAT I HAVE AN EXTENUATING CIRCUMSTANCE WHICH MEETS THE CRITERION LISTED ABOVE. ALSO, I GIVE PERMISSION FOR Southern UNIVERSITY at New Orleans FINANCIAL AID ADMINISTRATOR TO CONTACT THE PEOPLE WHO PROVIDED DOCUMENTATION TO SUPPORT MY "DEPENDENCY OVERRIDE".

Student's Signature

Banner ID Number

Date