

Professional Judgment Request For Review of Dependency Status 2018-2019

Student ID #	Student's Last Name	Student's First Name	MI
Address	City	State	Zip
Program of Study	Phone Number ()	Email Address (other than school email)	

REASONS FOR A DEPENDENCY STATUS CHANGE:

Students who are estranged from their parents due to extenuating or unusual circumstances **that can be documented by one or more objective third party individuals** may qualify to be considered independent for financial aid purposes. To justify a dependency status change, dysfunction or no contact in the relationship between the student and both parents must exist. Dysfunction may be the result of an abusive family environment that endangers student health or safety, abandonment, or other irreconcilable differences within the family.

Per Federal guidelines, the circumstances below are NOT justifiable reasons for a dependency status change:

- ✓ You (the student) do not reside with your parents.
- ✓ Your parents refuse to pay for college or are financially unable to pay for college.
- ✓ Your parents do not claim you as a dependent on their income tax return.
- ✓ Your parents are not willing to provide their information on the parent section of the FAFSA or for verification.
- ✓ You do not rely on your parents for support, financially or otherwise.
- ✓ Your parent(s) live in another country.
- ✓ You do not get along with your parents or have stopped talking with them due to a disagreement.

If you are requesting a Dependency Status Review based on one of the reasons listed above, you are a dependent student and should not complete this form.

Incomplete request forms will not be reviewed until all documentation has been submitted.

Have you already filed the 2018-19 FAFSA? YES NO

PLEASE SELECT THE OPTION THAT APPLIES TO YOU:

- INITIAL REQUEST: This is your First Time submitting a Dependency Review Request to NTC
- RENEWAL REQUEST: You have previously submitted a Dependency Review Request to NTC last academic year and were approved.

PARENT'S INFORMATION

Mother's Name: _____ Address: _____

Father's Name: _____ Address: _____

Parent's Marital Status: Married Divorced Separated Never Married

If needed, please explain: _____

Documentation Required



Initial Request

Write a personal letter (*email will not be accepted*) explaining the extenuating circumstances and describing your relationship with your parents. Your signed and dated letter with your NTC student ID number must include the following:

- a) Why you cannot provide parental financial information on the FAFSA.
- b) The whereabouts of your biological/legal father and his current living arrangements. Include any contact you had with your biological/legal father and the frequency of contact with him over the past year.
- c) The whereabouts of your biological/legal mother and her current living arrangements. Include any contact you had with your biological/legal mother and the frequency of contact with her over the past year.
- d) Your living arrangements over the past year. With whom have you lived?
- e) When did you last live with your parent(s)?
- f) Who has provided financial support to you during the past year?

Please attach:

- ✓ **A letter from a friend or relative who is familiar with the situation.**
- ✓ **Police reports, court orders, records of court proceedings, restraining orders, detailed letters from doctors, lawyers, counselors, teachers and/or respected officials of the community (pastor or priest) etc., confirming the specifics identified in the student statement (personal letter). These dated, signed letters must be on letterhead and include the title or profession of the individual. This is considered third party (objective) documentation. This needs to be a letter from someone other than a relative or a friend.**
- ✓ **A signed and dated copy of your 2016 Federal Tax Return (if you were required to file a tax return). Submit a copy of all your W-2 forms if you worked in 2016 even if a Tax Return was not filed.**

Did anyone claim you on either of their 2016 YES NO
or 2017 Federal Income Tax Returns

If YES, Person's Name: _____ Relationship to you: _____

Did you receive financial support (health insurance, auto payment, room/board, use of a vehicle, cash, etc.) from your parents in either of the last two Federal tax years? YES NO

If YES, enter the type of support:	Tax Year Received (check one)		Approximate Value:
	<input type="checkbox"/> 2016	<input type="checkbox"/> 2017	\$
	<input type="checkbox"/> 2016	<input type="checkbox"/> 2017	\$
	<input type="checkbox"/> 2016	<input type="checkbox"/> 2017	\$

Report all other sources of income received in 2016 that were not listed on your 2016 Federal Income Tax Return. Indicate the amount and the source of such income/support, including assistance from relatives/friends, interest income, Social Security, SSI, Welfare, etc.

Amount: \$	Source:
Amount: \$	Source:

**Renewal Request****Academic Year original documentation submitted:**

Write a personal letter (*email will not be accepted*) summarizing your original circumstances and any changes that have occurred in your situation since you were originally granted a dependency override. Your signed and dated letter with your NTC student ID number must include the following:

- a) Why you cannot provide parental financial information on the 2018-2019 FAFSA.
- b) An explanation of your current relationship status with your parents.
- c) Submit any updated or new (within the last 12 months) documentation, if any.
- d) Your living arrangements over the past year, and how you have supported yourself. Did anyone provide you with any type of financial support?

Did you resume living with your parents in the past year or current year? YES NO

Please attach:

- ✓ Provide one additional letter from a friend, relative, or third party (someone different not used previously) who is familiar with your current situation.
- ✓ A signed and dated copy of your 2016 Federal Tax Return (if you were required to file a tax return). Submit a copy of all your W-2 forms if you worked in 2016 even if a Tax Return was not filed.

Did anyone claim you on either of their 2016 or 2017 Federal Income Tax Returns YES NO

If YES, Person's Name: _____ Relationship to you: _____

Did you receive financial support (health insurance, auto payment, room/board, use of a vehicle, cash, etc.) from your parents in the last Federal tax year? YES NO

If YES, enter the type of support:	Tax Year Received (check one)	Approximate Value:
	<input type="checkbox"/> 2017	\$
	<input type="checkbox"/> 2017	\$

Report all other sources of income received in 2016 that were not listed on your 2016 Federal Income Tax Return. Indicate the amount and the source of such income/support, including assistance from relatives/friends, interest income, Social Security, SSI, Welfare, etc.

Amount: \$	Source:
Amount: \$	Source:
Amount: \$	Source:

Helpful Tips:

A legal parent includes a biological or adoptive parent, or a person that the state has determined to be your parent. Grandparents, foster parents, legal guardians, older brothers or sisters, widowed stepparents, and aunts and uncles are not considered parents unless they have legally adopted you.

After Filing the FAFSA and Submitting Your Appeal:

- ✓ If your appeal is approved, we will notify you and we will submit a correction to the FAFSA Processing System with all appropriate dependency override codes. Your financial aid will be packaged based on independent status.

- ⊘ If your appeal is not approved, we will notify you about our decision. In order to receive a financial aid package, you MUST then provide parent financial information and signatures using FAFSA online. Return to <https://fafsa.ed.gov/>. Select “Correction,” and provide all necessary information, including all required parent information and signatures.

Requests are typically reviewed within 1 – 2 weeks. Depending on your circumstances and current eligibility, the review may or may not warrant a change in your dependency status. The Financial Aid Office will notify you of the results with an email to your NTC student email account. If you have any questions, please feel free to email our office at financialaid@ntc.edu .

Certification:

By signing this application you certify that all of the information you provided is true and complete to the best of your knowledge and you agree, if asked, to provide further documentation that will verify the accuracy of your completed form. Providing inaccurate or false information may result in the denial, reduction, withdrawal and/or repayment of financial aid. Also, you certify that you understand that the Department of Education has the authority to verify information reported on this form with other state and federal agencies. If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student Signature

ID #

Date

Return documentation to the Financial Aid Office via:

Email: financialaid@ntc.edu

Mail: 1000 W Campus Drive, Wausau WI 54401

Fax: 715.301.2904

OR: drop off at the Financial Aid Office

A financial aid advisor is available to discuss your situation or answer questions as you complete this form. Please feel free to call us for assistance at 888.NTC.7144, Ext. 5862.

The decision of the Student Financial Aid Office is final; the U.S. Department of Education does not consider appeals to change dependency status.