

Financial Assistance 8600 University Boulevard Evansville, IN 47712 Phone: 812-464-1767 or 800-467-1965

Fax: 812-461-5305 / Email: finaid@usi.edu

This form should only be completed if you had a Dependency Override approved in the prior academic year.

A. Student Information				
Last Name	First Name		M.I.	USI Student ID number (SSN if ID is unknown)
Street Address	City	State	Zip Code	Phone Number (Include Area Code)

B. Dependency Definition (Defined by the U.S. Department of Education)

You are considered an independent student for financial aid purposes if you meet any ONE of the following criteria:

- You were born before January 1, 1999.
- You were married or separated but not divorced at the time you filed the FAFSA.
- You are a veteran of or are on active duty in the U.S. Armed Forces (for purposes other than training).
- You are admitted to a master's or doctorate program for the 2022-2023 academic year.
- You have a child or children for whom you provide more than 50% support.
- > You have legal dependents, other than children or a spouse, who live with you and for whom you provide more than 50% support.
- > You are or were in a court-appointed legal guardianship until you reached the age of majority (18 in Indiana).
- You are or were declared by a court in your state of legal residence to be an emancipated **minor**.
- Both of your biological or adoptive parents are deceased.
- > At any time since you turned age 13, you were or are in foster care or you were or are a dependent or ward of the court. (Incarceration in a youth detention center or group home does not meet this requirement.)
- You were determined to be a homeless or unaccompanied youth or at risk of being homeless on or after July 1, 2021 by a school district homeless liaison, a directory of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development, or a director of a runaway or homeless youth basic center or transitional living program.

If you meet any one of the above criteria, you do not need to complete this form. However, you may be required to submit documentation to verify your status.

C. Current Circumstances

Our records indicate that you were granted a dependency override for the prior financial aid award year. In order to continue to process your financial aid application with the same status as the prior year, you must provide information about your current relationship with your parents.

Did you resume living with your parent(s) in the past year or current year?

YES / NO

2. Will your parent(s) claim you as a dependent on a Federal Tax Return in 2020 or 2021? YES / NO / Don't Know

3. Did your parent(s) provide you with any support in cash or contribute to paying for any part of your YES / NO

college expenses including but not limited to housing and food?

4. Have any of the circumstances that were used to determine your original independent status changed? YES / NO

D. Certification and Signature(s) (Typed/Electronic signatures are NOT accepted)

I hereby certify that all information contained in this appeal, including my personal statement and other documentation, is true and complete to the best of my knowledge. Iswear or affirm that I have not knowingly or intentionally provided any false statements or fraudulent documentation. I understand that if I am found to have knowingly or intentionally given false or fraudulent statements and/or documentation, my appeal will be denied and my eligibility for Federal and State student aid jeopardized. Federal regulations stipulate that evidence of fraud must be reported to the U.S. Department of Education for possible investigation by the Office of the Inspector General and possible prosecution by the United States Attorney.

Student Signature Date