Clear Form

2020-21 Dependency Override Renewal Request

File your 2020-21 FAFSA application prior to submitting this form.

A. Student Information

Student's Name:_____ LC ID: _ | | | | | | | | |

B. Information

This request is only for students who had an **approved** Dependency Override Appeal at Louisiana College for the 2019–20 academic year. **Note:** if you previously completed a Dependency Override due to homelessness or self-supporting and at risk of homelessness or similar circumstances, please **stop** and contact the Financial Aid Office.

A student with an **approved** Dependency Override Appeal for the 2019-2020 aid year at LC who does not meet the federal criteria for independent status on the 2020-2021 FAFSA or CA Dream Act application may submit this Dependency Override Renewal Request. Upon receipt of your request, our office will determine if circumstances continue to exist for granting independent status.

I understand that if my Dependency Override Renewal Request is approved additional documents may be required to complete my financial aid application (*once lc has updated my FAFSA application to reflect my Independent Status*). I am responsible for submitting all requested documents in a timely fashion.

C. Personal Statement – In the space below, provide a detailed explanation of the unusual & extenuating circumstances that remain unchanged, which led to your approved independent status during 2019-2020. If you require additional space, please attach pages as necessary.

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F. Certification and Signatures – Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student whose information was reported on the FAFSA must sign and date. Warning! If you purposely give false or misleading information you may be fined, sentenced to jail, or both.

Student Signature: _____ Date_____

This worksheet must be signed and dated to be valid. Electronic and/or digital signatures are not valid.

For Office Use Only

☐ D/O Renewal Approved ☐ Update *dependency* field to "**I**" for independent

☐ D/O Renewal Denied

Comment(s) Supporting Decision:

Processed/Reviewed By: Date:

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https://www.lacollege.edu/students/financial-aid/