

Financial Aid Office
13100 College View Drive
Eden Prairie, MN 55347

Phone: 952-995-1300
Fax: 952-995-1389
Email: fa@hennepintech.edu

Last Name**First Name****Student ID or StarID**

NOTE: You are automatically considered to be Independent and do not need to submit this form if any of the following applies:

- ✓ You were born before January 1, 1992.
- ✓ You were married as of the date you filed your original FAFSA for 2015-2016.
- ✓ You are enrolled in a masters or doctorate program (such as an MA, MBA, MD, JD, PhD, EdD, graduate certificate, etc.)
- ✓ You are currently serving on active duty in the U.S. Armed Forces for purposes other than training.
- ✓ You are a veteran of the U.S. Armed Forces.
- ✓ You have children who will receive more than half of their support from you between July 1, 2015 and June 30, 2016.
- ✓ You have dependents (other than your children or spouse) who live with you and receive more than half of their support from you, now through June 30, 2016.
- ✓ At any time since you turned age 13, both of your parents were deceased, you were in foster care or a dependent or ward of the court.
- ✓ As determined by a court in your state of legal residence, you are or were an emancipated minor.
- ✓ As determined by a court in your state of legal residence, you are or were in legal guardianship.
- ✓ At any time on or after July 1, 2014, your high school district homeless liaison determined that you were an unaccompanied youth who was homeless.
- ✓ At any time on or after July 1, 2014 the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development determined that you were an unaccompanied youth who was homeless.
- ✓ At any time after July 1, 2014 the director of a runaway or homeless youth basic center or transitional living program determined that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless.

By Federal Law the following conditions are **not acceptable** for consideration for a Dependency Status Override:

- ✓ Parent's refusal to contribute financially to a student's education or provide data for the FAFSA.
- ✓ Parent's refusal to claim a student as a tax exemption.
- ✓ Student's demonstrated self-sufficiency and/or living on one's own.

NOTE: For a review of a student's 2015-2016 Petition for Dependency Status Override, the student must complete and submit page two of this document, signed, along with the Requested Documentation as detailed on next page.

Continuing students that have had this process completed in prior years must complete and submit documentation and it will be reviewed on a case by case basis.

Financial Aid Office
13100 College View Drive
Eden Prairie, MN 55347

Phone: 952-995-1300
Fax: 952-995-1389
Email: fa@hennepintech.edu

Last Name

First Name

Student ID or StarID

For a review of a student’s 2015-2016 Petition for Dependency Status Override, **the student must complete and submit this signed document, along with the Requested Documentation, as detailed below:**

_____ 1. Your custodial parent has died and the other natural parent is still living. You, however, have neither had contact with nor received any financial support from the living parent for a significant period of time.

Requested Documentation:

- ✓ Letter from you explaining the estrangement situation with your parent (s) in detail.
- ✓ A copy of the death certificate for the deceased custodial parent.
- ✓ A letter or statement from an objective third party (legal counsel, counselor, clergy) which supports your claim that you have neither lived with nor received financial support from the non-custodial parent for a significant period of time.

_____ 2. **Your family situation is unsafe.** This is the result of physical abuse, emotional abuse or drug or alcohol abuse.

Requested Documentation:

- ✓ A letter from you explaining the unusual circumstance or situation in detail.
- ✓ Two letters (on official letterhead) explaining the situation in detail from separate objective third-party individuals such as a minister, social worker, psychologist, high school counselor, teacher, doctor, lawyer or another counseling professional.

_____ 3. **You were previously married and now are divorced/widowed.**

Requested Documentation:

- ✓ Copy of divorce decree or death certificate.
- ✓ A letter explaining why you believe you should be considered independent.
- ✓ Must show self-sufficiency (income, bills, etc.)

NOTE: Please ensure student’s name, student ID number and/or social security number appears on all submitted documents requested to complete the signed 2015-16 Petition for Dependency Status Override. Upon completion please submit all documentation to the address above.

Student Certification: _____ Date: _____

FOR OFFICE USE ONLY

Approved: _____

Denied: _____

Comments: _____

HTC FA Director Signature: _____ Date: _____