

## Kean University Office of Financial Aid 1000 Morris Avenue Union, NJ 07083

## 2025 - 2026 Appeal for Dependency Override

The Federal Student Aid Programs are based on the concept that the student *and* parent(s) are primarily responsible for meeting a student's educational expenses. The U.S. Department of Education generally defines unmarried undergraduate students under the age of 24 as **dependent**. For such students, aid eligibility is determined by reporting their natural or adoptive parent's income and assets, as well as their own, on the Free Application for Federal Student Aid (FAFSA).

If, however, you are unable to provide either of your parents' information on the FAFSA due to unusual circumstances, you may petition to the Office of Financial Aid for consideration of a **dependency override**.

To petition for independent status, complete the information below, attach the required documents listed on Page 2, and submit all pages in person or via mail. After the committee reviews your appeal, you will be contacted regarding their decision and given further processing instructions. If the appeal is denied, you will be required to provide parental data on the FAFSA; you may also receive a request(s) for parent's tax return transcript and other verification items prior to processing of your financial aid award(s). *Our decision is final and cannot be appealed to the U.S. Department of Education*.

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## **Student Certification**

I certify that the information in my personal statement and in the attached documents are true, correct, and complete. I authorize this information to be used in conjunction with information provided on the FAFSA for the purpose of calculating eligibility for financial aid. If requested, I agree to provide any additional supporting documentation necessary to verify the information reported.

Student Signature:	Date:
Student Name:	Kean ID #:
Address:	Phone #:
City, State, Zip:	Kean E-mail:

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Stuc	lent Name:	Kean ID #:	
<u>Doc</u>	ruments Requir	<u>red</u>	
:	A detailed statement from you explaining your circumstances (including dates) and why you hould be classified as an independent student. Indicate your parents' current or last known address.		
	<ul><li>Abusive</li><li>Abandor</li><li>One deconother for</li><li>Custody</li><li>Parent (s</li></ul>	amstances may include, but are not limited to: or dangerous family environment ment by parent(s) eased parent [attach copy of death certificate]; unknown who two or more years granted by the courts to individual (s) other than biological s) incarcerated (attach documentation of incarceration); unknown	parent.
	Conditions th  Student's  Student i  Parents'	her for two or more years  at are <i>not</i> grounds for a dependency override are: s self-sufficiency (working and/or not claimed on parents' ta not residing in parents' home refusal to provide information on the FAFSA inability or unwillingness to contribute to the student's educ	,
(	Two letters from objective third parties with first-hand knowledge of your situation. At least one letter must be from a professional, e.g., minister, social worker, counselor, or teacher, on their official letterhead.		
3.	Supporting doc	suments such as: police report, court order, or social service	agency letter.
		AID OFFICE USE ONLY  Override Approved Denied	

Processor Signature: \_\_\_\_\_ Date \_\_\_\_\_

Secondary Signature \_\_\_\_ Date \_\_\_\_\_