

## 2013-2014 Dependency Override Letter of Support Cover

LMU requires that students requesting to be considered independent submit three letters of support from family members, friends or professionals such as a psychologist, therapist, H.S. or college counselor, minister, attorney, social worker familiar with your family situation.

letter.	a letter in support of your request to be c	considered ind	epenaent,	attach th	is form to	tneir
Student Name	Student ID					
This section is to be completed by th	e person writing the letter in support of y	our dependen	cy overrid	e.		
Name						
Title						
Address						
Phone Number						
Relationship to the student						
Years you have known the student						
Attach a letter (use professional lett independent of his/her parents.	erhead if applicable) indicating your reaso	ons in support	of this stu	dent bein	g conside	red
l understand that this letter will be u financial aid.	sed for the purpose of qualifying the stud	dent for federa	l, state an	d instituti	onal sour	es of:
I certify that the information provid	ed is true.					
I certify that I am aware that the Fina fraud cases to the Federal Processin	ncial Aid Office of Loyola Marymount Un g Center for legal prosecution.	iversity reserv	es the righ	it to repor	t all confi	rmed
Signature		Date				

Fax: 310-338-2793

Mail to: LMU Financial Aid Office 1 LMU Drive, Suite 270 Los Angeles, CA 90045

## To Submit via email:

Click the 'Submit by Email' button if you have an email client configured (eg: Outlook, Outlook Express, Entourage etc.) -OR- save the file to your computer and attach the file using your web-based email (AOL, Yahoo, Gmail, etc.) and send it to finaid@lmu.edu. Make sure to attach scanned signatures and other relevant documents to the email before sending.