

DPSTAT

Office of Financial Aid 2014-2015 Dependent Status Override Form

5	Student N	Name:	J#								
		ail address:	Home Phone Number:								
r le	Note: Appeals are reviewed based on the order of which they are received. However, during peak processing periods, which are April – September and December – February, the review process may take 4 weeks or longer. There is no guarantee a dependency override will be granted. Students should make the appropriate payment arrangements to satisfy tuition and fees when due to prevent from being dropped for non- payment. Notification of the appeal decision will be sent to your CCP email account.										
	Based on the guidelines set by the U.S. Department of Education you are a Dependent student. We do recognize that there are special circumstances in which students are not able to obtain parents' information. Listed below are reasons that will not be considered: Student has a parent or step-parent that refuses to provide information or support. Student has chosen to leave parents and put him/herself through college. Student is living at home (or with relatives) but paying rent. Student resides on his/her own, and pays their own rent/housing. Student's parents reside outside of the United States.										
	1). Required documentation -Failure to include the required information will result in an automatic denial.									•	
		☐ Three different letters from 1) the student; 2) two other parties that can substantiate information provided by the student.									
		o All letters must be <u>signed</u> by the person writing to Whereabouts of <u>both</u> parents must be included in on The letters should explain the circumstances that your parents. o Letters should include the last date of contact with	n all (3) t led to y	letters ou no							
		As part of the (3) letters you can submit one from E official on letterhead explaining the parental situation their letters.									
		Any court documentation showing custody or guard	dianship	orde	rs.						
		Death certificate for deceased parent or obituary. A copy of your leasing or rental agreement, copy o	f monthly	y bills	s (in y	our r	name	e)			
	>	We are required to verify income for students submitting a Dependency Override form. Please submit the following in addition to your override documentation.									
		2014-2015 Independent Verification Worksheet (V 2013 IRS Tax Transcript (or IRS data retrieval) and If you did not file a tax return, please provide a lette	all 201				are fi	nanc	ially	supp	orted.

Student Name:	J#:	DPSTAT								
2). Please answer all questions										
Did anyone claim you on their 20	13 Federal Income Tax retu	ırn?								
NoYes − Person's nameRelationship to you										
Have you previously been appro	ved for a dependency over	ride at CCP? (check one)								
	 □ No- you must provide all the required documents listed above. □ Yes- Students who have been approved for a Dependency Override in a prior year must submit: 									
	ter should state the names of ent relationship between the s	both parents and provide information as to student and both parents.								
•	t Verification worksheet (V1) of and all 2013 W-2 forms.									
I understand by signing this form, I supporting documentation submitte										
Student Signature		Date								
Please include all requested documents	s with this form and return to:									
Mailing Address: Community College of Philadelphia Office of Financial Aid		For in-person submission, visit us at: Enrollment Central, Bonnell Building, Ground Level								
Mint Building, MG-13 1700 Spring Garden Street Philadelphia, PA 19130	Note: Additional informa	tion may be requested at a later date.								
FOR OFFICE USE ONLY										
□ APPROVED□ DENIED										
	APPROVED BY	DATE								