

2024-2025 Dependency Petition

Student's Name _____ **Student ID** _____
Complete Address _____
Email Address _____ **Phone Number** _____

Federal regulations require parents to have the primary responsibility to pay for a dependent student's educational expenses. The U.S. Department of Education does not consider any of the conditions listed below, singly or in combination, as qualifying unusual circumstances meriting a dependency override:

- Parents refuse to contribute to the student's education;
- Parents are unwilling to provide information on the FAFSA or for verification;
- Parents do not claim the student as a dependent for income tax purposes;
- Student demonstrates total self-sufficiency.

CCA understands unusual circumstances occur and some students may have a unique family situation. This form is used for when you have reported your personal, other (or at risk of homelessness) or unusual circumstances on the FAFSA and unable to obtain parental information. If you believe you have an unusual or unique family situation, please complete this form and submit all required documents to the Financial Aid Office.

**Please note: all decisions are made at the discretion and professional judgement of the CCA Financial Aid Office on a case-by-case basis. Submission of this form and supporting documents does not guarantee approval. CCA is not required to perform dependency overrides, and if the financial aid office determines an override is not appropriate, the decision cannot be appealed.*

SECTION 1		You are automatically considered independent and DO NOT need to submit this form if you answer YES to any of the following. If you answer NO to all of these, proceed to SECTION 2.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Were you born before January 1, 2001?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	As of today*, are you married? * <i>"As of today"</i> refers to the date you signed your FAFSA.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are you currently serving on active duty in the U.S. armed forces for purposes other than training?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are you a veteran of the U.S. Armed Forces?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Do you have children or other people (excluding your spouse) who live with you and receive more than half of their support from you now and between July 1, 2024 and June 30, 2025?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Were you an orphan, a ward of the court or in foster care at any time since you turned 13?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are you or were you a legally emancipated minor, determined by a court in your state of residence?
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Are you or were you in a legal guardianship with someone other than your parent or stepparent, determined by a court in your state of residence?

SECTION 2		You may be independent if you answer YES to the following; if so, you must submit the required documentation (listed to the right). If you answer NO, proceed to SECTION 3.	
<input type="checkbox"/> Yes	<input type="checkbox"/> No	At any time on or after July 1, 2023, were you unaccompanied and either (1) homeless or (2) self-supporting and at risk of being homeless?	
		If the answer is "YES" to any of the following, you must submit the required documentation (listed to the right).	
		<input type="checkbox"/> Director or designee of an emergency or transitional shelter, street outreach program, homeless youth drop-in center, or other program serving those experiencing homelessness	* Provide letter from the Director or designee of the program
		<input type="checkbox"/> Your high school or school district homeless liaison or designee	* Provide letter from your high school or school district homeless liaison or designee
		<input type="checkbox"/> Director or designee of a projected supported by a federal TRIO or GEAR UP program grant	* Provide letter from the Director or designee of the program
		<input type="checkbox"/> Financial Aid Administrator (FAA)	* Provide 1) statement explaining your circumstances 2) letter or documentation from non-family member to support circumstance and 3) any other documentation supporting circumstance

Student's Name _____

Student ID _____

SECTION 3		You may be independent if you answer YES to the following. If you answer NO, proceed to SECTION 4.
<input type="checkbox"/> Yes	<input type="checkbox"/> No	Do unusual circumstances prevent you from contacting your parents or would contacting your parents pose a risk to you?
		A student may be experiencing unusual circumstances if they: <ul style="list-style-type: none">• Left home due to an abusive or threatening environment;• Are abandoned by or estranged from their parents;• Have refugee or asylee status and are separated from your parents, or your parents are displaced in a foreign country• Are a victim of human trafficking;• Are incarcerated, or your parents are incarcerated, and contact with the parents would pose a risk to you; or• Are otherwise unable to contact or locate your parents <p><i>*If the student's circumstances resulted in their not having a safe, stable place to live, they may be considered a homeless youth and should review the answer to SECTION 2 about being unaccompanied and homeless.</i></p>
		REQUIRED DOCUMENTATION
		<input type="checkbox"/> Signed and dated statement of explanation outlining circumstances. <input type="checkbox"/> Third-party documentation or signed and dated letter from non-family member to support your circumstances. <input type="checkbox"/> Other documentation to support your circumstances.

SECTION 4	I do not meet any of the criteria listed in SECTION 1, 2 OR 3 (Request of a Direct Unsubsidized Loan ONLY)
<input type="checkbox"/>	I am unable to provide my parents' information on my 2024-2025 FAFSA because I have contact with my parents, but my parents are unwilling to provide their information.
<p><u>Please read next paragraph and submit a signed and dated statement from your parents along with this form. You will only be eligible for an unsubsidized loan at the dependent student grade level limit.</u></p> <p><i>Your parents' refusal to complete the FAFSA or their unwillingness to provide financial support does not justify a dependency override. Your parents must write and sign a statement indicating they refuse to provide you the information you need for your FAFSA and they do not and will not provide you any financial support. The statement must include the date the support ended.</i></p> <p><i>*If you are approved for this option, you will not qualify to receive other types of federal student loans (including Direct Subsidized Loans), federal grants, or Federal Work-Study programs.</i></p>	

CERTIFICATION & SIGNATURE

I certify that the information reported above is true and agree to provide information that will verify the accuracy of my information, if requested by an authorized official of the Financial Aid Office.

Warning: If you purposely give false or misleading information on this worksheet, you may be fined, sentenced to prison, or both. ***Typed/e-signatures cannot be accepted.**

Student Signature

Date