

**2025-2026 Unusual Circumstance Request (Dependency Override)**

Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Student ID Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

The Free Application for Federal Student Aid (FAFSA) contains eight questions to determine your dependency status (See step three of the FAFSA). If you can answer "yes" to at least one of these eight questions, you will be considered an independent student. If you answer "no" to all eight questions, you will be considered a dependent student by federal definition and are required by law to provide parental information and signatures to be considered for financial aid.

In certain cases, students can request to be considered for independent status when they submit proper documentation. **Please note that the following situations do not constitute a change in dependency status:**

* Parents refuse to contribute to student’s education
* Parents are unwilling to provide information on the FAFSA or for Verification
* Parents do not claim student as a dependent for income tax purposes
* Student does not live with parent
* Student demonstrates total self-sufficiency

Reason for Request:

* Abandonment by parents
* Abusive family environment that threatens the student’s health or safety
* Parent(s) are incarcerated/institutionalized

By signing this form, I am certifying that the information included is accurate and correct. I will monitor my student email and my Banner account for information regarding the status of my request.

Student Signature \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Questions?

University of Mary Washington Office of Financial Aid

1301 College Ave-Lee Hall 206

Fredericksburg, VA 22401

finaid@umw.edu

540-654-2468

**Documentation**

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| --- | --- |
| **Type of Documentation** | **Information to Include** |
| **Personal Statement** | * Explain relationship with parents * Detail reason for estrangement in student-parent relationship and the time period—include last date of contact and nature of contact * Justify claims of self-support |
| **Documentation of Circumstance: Includes (but not limited to)** letters of support from a professional knowledgeable third party (Counselor, minister, attorney, education, doctor, social worker, high school counselor, school district homeless liaison, or a director of an emergency shelter or transitional housing program), court documentation, etc. | * Name, signature, job title, address, and phone number * Confirmation of abandonment/abuse/homelessness/etc. * Confirmation of self-support * Court locations must be from state of legal residence * Time period of incarceration * Supporting parent is deceased and you no longer have contact with your surviving parent |