2019-2020 Dependency Override Request

Section A – Student Information (Please print clearly)

Last Name     First Name M.I.    Email
Street Address City State Zip Code

What you should do:
1. Complete this entire worksheet. You must answer all the questions and the form must be SIGNED.
2. Please submit all documents at the same time.
3. Clearly print UIN on every page of 8 ½ x 11 legible copies.

If you are planning to attend the University of Illinois at Chicago during the 2019-2020 academic year and you feel you are independent for financial aid purposes, you must submit a letter explaining in detail the reason(s). Please note that per federal regulations, a parent’s unwillingness to provide their financial data, a student’s living arrangement, or the student’s ability to support themselves financially do not solely constitute grounds for a student to be considered independent. Approval of the appeal is not automatic or guaranteed. Appeals are considered on a case-by-case basis.

Section B – Dependency Override Documentation

Check below the most relevant to your situation and attach the appropriate documentation:

☐ Dire circumstances with parent(s).
   A. Please submit a typed letter explaining in detail the situation.
   B. Signed letters (on agency letterhead) from at least three professionals (i.e. high school counselors, therapist, clergy, police) verifying your situation.
   C. Appropriate documentation (i.e. court papers, police reports, documentation from social services agencies) verifying the circumstances mentioned in the appeal.
   D. A copy of a current lease, signed by you and your landlord showing your name as lessee.

☐ Unaccompanied youth who is homeless. Please submit all items listed above (except letter D).

☐ All other circumstances. Please submit all items listed above.

Section C – Student Signature

IMPORTANT: Return this form to Student Financial Aid and Scholarships. When submitting documentation:
1. Clearly print UIN on every page of 8 ½ x 11 legible copies.
2. Include all appropriate signatures.

I certify that the information provided on this form and its attachments are true and correct.

Student Signature Date

ENTER YOUR 9-DIGIT UIN

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