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2020-2021 Request for Dependency Override

There are unusual circumstances that can allow a financial aid office to consider a dependent student to be an independent student for the purposes of determining student aid eligibility. *Unusual circumstances include an abusive family environment, neglect, or abandonment.* The following do not constitute unusual circumstances: parent(s) refuse to contribute towards the student’s education; parent(s) are unwilling to provide information for the FAFSA or the verification process; parent(s) do not claim the student as a dependent on their taxes; or student demonstrates total self-sufficiency.

If, after reading the above, you believe your circumstances warrant you being considered an independent student, please submit this request along with the following:

- A statement from you including the following:
 - Detailed description of the unusual circumstances which constitute an abusive family environment, neglect, or abandonment.
 - When your parents stopped providing support to you.
 - How you now support yourself.
- A signed letter on letterhead from a member of the clergy, social worker, psychologist, high school counselor, teacher, doctor, or other professional stating his/her detailed knowledge of your situation.
- A signed letter from an adult such as a family friend, adult extended family member, or employer stating his/her detailed knowledge of your situation.
- 2020-2021 Verification Worksheet.
- If you have not already done so, use the IRS Data Retrieval Tool in FAFSA on the web to retrieve and transfer 2018 IRS income information into your FAFSA.
OR
Provide a copy of your 2018 Federal Income Tax Transcript from the IRS (www.irs.gov)
OR
If you did not and were not required to file a federal tax return, provide your 2018 W2 form(s) and an *IRS Verification of Non-Filing Letter* dated on or after October 1, 2019, attesting you did not file a 2018 IRS income tax return.
- If your income was below \$10,400 then you must also complete the *2020-2021 Means of Support form*.

By signing below, I/we certify that all of the information I/we provided is true and complete to the best of my/our knowledge and, I/we agree, if asked, to provide information that will verify the accuracy of this completed form.

STUDENT NAME: _____

ID: _____

STUDENT SIGNATURE: _____

DATE: _____