



**OKLAHOMA  
CITY**

**2024-2025**

**REQUEST FOR CHANGE OF DEPENDENCY STATUS**

Name: \_\_\_\_\_

SSN: \_\_\_\_\_

Address: \_\_\_\_\_

In accordance with the Department of Education Federal Regulations, a student must meet at least one of the following federal requirements to qualify for financial aid as an independent student. According to the Federal Financial Aid guidelines, you are a **dependent student** and will need to include your parent's information on the Free Application for Federal Student Aid (FAFSA) unless you meet one of the following categories:

- You were born before January 1, 2001.
- As of today, you are married or separated, but not divorced.
- Are currently serving on active duty in the U.S. Armed Forces for purposes other than training.
- You are a veteran of the U.S. Armed Forces.
- You have children who received more than half of their support from you between July 1, 2024 and June 30, 2025.
- Have dependents (other than your children or spouse) that live with you and receive more than half of their support from you now through June 30, 2025.
- At any time since you turned 13, both your parents were deceased, you were in foster care, or were considered a dependent or ward of the court.
- An emancipated minor as determined by a court in your state of legal residence.
- As of today, you are in a legal guardianship as determined by a court in your state of legal residence.
- On or after July 1, 2023, your high school or school district homeless liaison determined that you were an unaccompanied youth who was homeless.
- On or after July 1, 2023, the director of an emergency shelter program funded by the U.S. Department of Housing and Urban Development determined that you were an unaccompanied youth who was homeless.
- On or after July 1, 2023, the director of a runaway or homeless youth basic center or transitional living program determined that you were an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless.

**The following circumstances are not grounds for an override:**

- A student living on his or her own and paying their own expenses.
- Parent's unwillingness to provide information on the application.
- Not being claimed as a dependent on your parent's current year tax return.
- The desire for grants instead of loans.

There may, however, be unusual circumstances that you feel warrant a re-evaluation of your dependency status. If you feel your unusual case warrants consideration, please submit this completed form and attach a thorough written explanation of your unusual circumstances with documentation along with the following items:

- The Free Application for Federal Student Aid (completed.) Do not mail to the Federal Processor.
- 2022 IRS Tax Return Transcript
- 2022 W-2's (supply all for calendar year)
- A completed 2024-25 Independent Family Size Form
- A copy of a lease agreement/Rental Contract (**current**)
- Verification of Current Employment
- Attach at least three (3) letters of reference
  - Two (2) must be professional references. Professional reference can include clergy, counselor, teacher, lawyer, etc.

After you have obtained the above information, bring all the documents to the Financial Aid & Scholarship Office and turn them in or mail to: **OSU-OKC Financial Aid & Scholarships, 900 N. Portland, Oklahoma City, OK 73107**. After submitting your request, it will be reviewed and a decision rendered. You will be notified of the decision by mail within three weeks.

***Failure to provide supporting documents will delay processing or result in your request being rejected.***

***(PLEASE COMPLETE OTHER SIDE OF FORM)***

### *Explanation of Circumstance*

Using the space below, please detail your circumstance that you feel warrant reconsideration of your dependency status (**Documentation is required**):

This image shows a blank sheet of white paper with horizontal ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

If your circumstances have not been adequately addressed with the space above, please attach an additional page.

STUDENT'S SIGNATURE

DATE

OFFICIAL USE ONLY:

## ACTION TAKEN

DATE \_\_\_\_\_

Comments:

Revised EFC:\_\_\_\_\_

FA Counselor's Signature: \_\_\_\_\_ Rev 4/2024