

Dependency Override Appeal

This form is for students seeking independent status due to unusual circumstances. All appeals require documentation.

Student Information

Name

Student ID

Date of Birth

Phone

Current Address

Email *

Reason for Appeal

Primary Reason

Parental abandonment

Abusive family situation

Unable to locate parents

Other unusual circumstances

Detailed Explanation of Circumstances *

Supporting Documentation (Required)

Third-party statement (counselor, clergy, social worker, etc.)

Court documents (if applicable)

Other documentation (describe):

Other Documentation Description

Certification

I certify all information is true and accurate.

Student Signature

Sign above

Date:

Date

(MM/DD/YYYY)