What is a Dependency Appeal?

The federal government defines specific criteria students must meet in order to be considered “independent” for financial aid purposes. If you do not meet these criteria, you may request the school’s financial aid office reevaluate your dependency status. A dependency appeal is the process the school uses to review your situation and determine if you are eligible to be considered independent. This can only be done in unique circumstances. NOTE: Parental unwillingness or inability to contribute is not considered a unique circumstance, nor is living on your own and paying for your own expenses.

Unique circumstances such as being estranged from your parent(s) due to extreme conditions (e.g. child abuse, abandonment, alcoholism, or drug abuse, etc.) which can be documented by an objective third party (e.g. pastor, high school or college professor, a social service agency official, etc.) may qualify for this special treatment.

How does the Process Work?

Each school establishes its own policies with regard to granting dependency appeals. As a result, a student could receive a dependency override at one school, but not another.

At Notre Dame, the appeals committee reviews your appeal and keeps the information confidential. You will be notified of the committee’s decision.

How do I submit an appeal?

Complete and submit this form along with the other required documentation to Notre Dame of Maryland University, Office of Financial Aid. NOTE: Appeals will not be reviewed until all paperwork/documentation is received.

Other notes:

- Completion of this form and submission of documents does not guarantee approval of a dependency appeal.
- Approval of an appeal does not guarantee receipt of additional aid.
- Your dependency status must be reevaluated each year until or unless you meet the federal government’s definition of an independent student.
Office of Financial Aid
2018-2019 Dependency Appeal Request Form

Student Name: _____________________________________________________________________________________

SSN (last four digits): ___ ___ ___ ___ Phone Number: ________________________________________________

☐ FAFSA
Complete and submit the 2018-2019 Free Application for Federal Student Aid (FAFSA) on-line at www.fafsa.gov to the
best of your ability. If you file taxes, retrieve your 2016 tax information for the FAFSA via the IRS Data Retrieval process.
Remember to include Notre Dame’s code (002065) so that the information may be released to our office.

☐ PERSONAL STATEMENT
Write and attach a clear and concise typed one-page explanation of your exceptional circumstance. Your signed and dated
statement must include a complete history of:
➤ Your relationship with your biological and/or legally adoptive parents - include their first and last names and last
known address
➤ Specific dates of events that caused your separation from your parents - include how long you have been
separated from your parents
➤ Do you have siblings – include their ages, where they live and describe your relationship with them
➤ Where you have lived since separating from your parents
➤ Your sources of income – see below for additional information
➤ How you have supported yourself while living apart from your parents – include if you have auto and/or health
insurance and who pays for them – include a copy of your card(s)

☐ THIRD PARTY DOCUMENTATION
Provide statements from two third-party references who are not family members who can verify the unique family
circumstances you described.
➤ Third party references include clergy members, counselors, social workers, physicians or law enforcement
officers.
➤ Letters should be detailed and refer to actual events – they should not be reiterations of events you have shared,
but should reflect the writer’s direct knowledge
➤ Police reports may, in some cases, substitute for one letter

☐ INCOME VERIFICATION
Submit the 2016-2017 student tax worksheet and household worksheet (available online). Your financial aid counselor will
contact you if any other documents will be needed.

Certification:
By signing this form, I certify that the information provided to support this appeal is true and correct to the best of my knowledge. I understand
that failure to provide requested documents will result in a denial. I also understand that completing this appeal does not guarantee an override
in my dependency status.

___________________________________________________________________________________________  __________
Student Signature Date

This form contains personally identifiable information.
Office of Financial Aid - 4701 North Charles Street, Baltimore, MD 21210
410.532.5369 (Voice) - 410.532.6287 (Fax) - finaid@ndm.edu  FAC18DEP