

Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ M.I. \_\_\_\_\_

Middlesex College ID Number: \_\_\_\_\_ Phone Number: \_\_\_\_\_

Based on your 2026-2027 Free Application for Federal Student Aid (FAFSA), it was noted that you are unable to provide parental information due to experiencing an Unusual Circumstance. Recognizing that unusual circumstances which prevent otherwise dependent students from providing parental information may exist, Financial Aid Administrators have the ability to make a documented determination of independence through a process called a Dependency Override. Dependency Overrides are permitted on truly exceptional circumstances and must be evaluated on a case-by-case basis.

Due to the complexity of the Dependency Override process, all Unusual Circumstance requests will be reviewed within 30 days or 4 weeks of receipt and decisions rendered within 60 days or 8 weeks of receipt. This timeframe is contingent on receipt of all requested documents.

**All decisions are final and may not be appealed.**

**Circumstances that *do not* merit a dependency override are:**

1. Parents refusing to contribute to the student's education;
2. Parents unwilling to provide information on the application or for verification;
3. Parents not claiming the student as a dependent for income tax purposes;
4. A choice made by the student to move out of his/her parent's home and be financially independent.

**Circumstances that *may* be considered for a dependency override evaluation are:**

1. Severe estrangement/abandonment from parents;
2. Abusive family environment that threatens the student's health or safety;
3. Unable to locate parents;
4. Parent(s) incarcerated;
5. Refugee or Asylee status.

**Please complete all the following items in support of your request:**

1. Briefly explain the unusual circumstance(s) that makes you an independent student.

2. Identify the name and location of both of your parents, if applicable.

Parent 1: Name: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

Parent 2: Name: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_

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3. Describe the last time you had contact with each of your parents (when, where, and the nature and extent of your contact).

4. Check off the box that best describes your relationship with your parents and provide an explanation.

☐ No communication

☐ Some Communication: Explain \_\_\_\_\_

☐ Other: Explain \_\_\_\_\_

5. Please provide the following items:

- A signed personal statement detailing your unusual circumstance;
- A signed letter from one (1) professional on official letterhead or agency stationery; and
- Signed letters from two (2) other adults who are aware of your situation.

*Statements from teachers, guidance counselors, members of the clergy as well as copies of appropriate court documents, police reports, etc. are also acceptable.*

All statements must include the following:

- Relationship of the individual writing the statement to you,
- Date the individual met you,
- Date the individual first learned of your circumstance(s),
- An explanation of your individual circumstance(s) and the relationship that you have with your parents.
- The letters **must** be signed and dated by the person writing the statement.

**If any of the documents are not available, please provide an explanation below:**

I certify that the information on this form is complete and accurate to the best of my knowledge. I understand that this form will be used to evaluate my application as an independent student and may be released to the New Jersey Higher Education Student Assistance Authority (HESAA).

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

<b>For Office Use Only FAC26UCR</b>
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