



A member of Minnesota State

## Dependency Status Override 2024-2025 Academic Year

The Department of Education defines a "**Dependent Student**" as a student who meets all of the following:

- was not born after January 1, 2001
- is not a veteran of the U. S. armed forces
- is not serving on active duty in the U. S. armed forces
- is not married
- is not an orphan
- was not a ward of the court
- was not in foster care after the age of 13
- does not have a legal guardian (other than parent)
- does not have children/legal dependents for whom he/she provides more than half support

→ A dependent student is required to use parental information when applying for financial aid until the **year** that they turn 24.

### **\*Parental refusal of support is NOT enough to qualify for a dependency override.**

The Financial Aid Director may change a student's dependency status from "dependent" to "independent" **when extenuating circumstances exist that are beyond the control of the student** and make parental support impossible.

To be considered for a dependency override, the student and parents must have severed their relationship due to extraordinary circumstances, (ie. abuse, neglect, or irreconcilable differences).

**You must provide third-party documentation, on letterhead, from a professional (such as a counselor, caseworker, clergy member, or legal representative) verifying your situation and supporting your request for a dependency status change.**

Please complete the Dependency Status Override Request Form and submit it with your third-party documentation to the Student Services Center. You will be updated via LSC e-Services whether your request for independent status has been granted.

This document can be made available in alternative formats by contacting Disability Services at 218-733-7650 (voice) or 218-733-7705 (TTY).

\* If you would like your preferred name on your LSC records, please update in your e-Services account in the "name and address" section. Your preferred name may not appear on every communication that you receive from LSC.

**Dependency Status Override Request**  
**2024-2025 Academic Year**

**\*Third-party documentation must be attached for your request to be considered.**

Name \_\_\_\_\_ Star/Tech ID \_\_\_\_\_

Preferred Name\* \_\_\_\_\_ Pronouns \_\_\_\_\_

I request that the Lake Superior College Financial Aid Office change my dependency status from "Dependent" to "Independent" based on the following **extenuating circumstances that are beyond my control** and make parental support impossible:

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

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**OFFICE USE ONLY**

\_\_\_\_\_ This request has been approved: \_\_\_\_\_

\_\_\_\_\_ This request has been denied for the following reason: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
FAO Signature

\_\_\_\_\_  
Date

**Return the completed form and documentation to the Lake Superior College Student Services Center, via fax at 218-733-5945, or via email at [financialaid@lsc.edu](mailto:financialaid@lsc.edu).**

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