



# PRAIRIE VIEW A&M UNIVERSITY

A Member of the Texas A&M University System

## PRAIRIE VIEW AGRICULTURAL AND MECHANICAL UNIVERSITY OFFICE OF STUDENT FINANCIAL AID

2008-2009

### PETITION FOR INDEPENDENT STATUS

The U. S. Congress and the Department of Education determine the criteria for whether a student is considered dependent or independent of their parents for financial aid purposes. Generally, how the applicant responds to the questions on Step 3 on the FAFSA determines their dependency status. If you were unable to answer 'yes' to any of the questions on Step 3 of the FAFSA, but feel there are extenuating circumstances which might warrant you being considered independent of your parents, you must explain those circumstances in a petition to your Financial Aid Specialist.

#### *PLEASE READ CAREFULLY BEFORE COMPLETING THIS APPLICATION*

The basic underlying premise of student financial aid is that it is primarily the responsibility of the student and their family to pay educational costs. When family resources are insufficient, financial aid may be awarded to supplement the resources of the student's family to help pay educational expenses. By petitioning, you are asking us to relieve your parents of the responsibility for using their resources to pay part of your college costs. Only very extenuating circumstances will make it reasonable to approve such a petition. **Be aware that having sufficient resources to pay your own expenses is NOT considered an extenuating circumstance for determining dependency status. Also, you can not use financial aid as a source of income when completing your application.**

For your petition to be considered:

1. You must not have been claimed as a tax exemption by any parent/stepparent in 2006.
2. You will not be claimed as a tax exemption by any parent/stepparent for 2007.
3. You must not have lived with your parent(s)/stepparent(s) during 2007 or any time during 2008.

Before the Office of Student Financial Aid can consider any changes regarding dependency status, you must provide us with all of the following documentation. Incomplete applications will not be considered.

1. Completed copy of the 2008-2009 Petition for Independent Status.
2. Copies of **your** 2006 and 2007 federal income tax returns.
3. Copies of **your parent(s)/stepparent(s)** 2006 and 2007 federal income tax returns.
4. Completed copy of the attached Reference form from your parent(s)/stepparent(s).
5. A completed Reference form from **two** of the following: a close relative with whom you are not presently living with, a high school counselor or teacher, a tax accountant and/or attorney, the person with whom you reside, a member of your religious institution, or the director of Boys' Ranch, Children's Home, Girls' Town, or a similar institution.
6. Copy of your last pay check stub.
7. Documentation of where you have lived since January 2007 (e.g. signed lease agreements, housing contract, etc.).
8. Completed copy of the 2008-2009 Verification Form.

To begin the petition process, bring your completed Petition for Independent Status and all supporting documentation to the Office of Student Financial Aid. Please allow 4 - 6 weeks for processing.

2008-2009 PETITION FOR INDEPENDENT STATUS

Name: \_\_\_\_\_ Social Security No: \_\_\_\_\_

Birthdate: \_\_\_\_\_ Telephone No: \_\_\_\_\_

Part I. Answer the following questions:

1. What amount of financial support did you receive from your parents in 2007? \$ \_\_\_\_\_
2. What amount of financial support will you receive from your parents in 2008? \$ \_\_\_\_\_
3. What other support do you receive from your parent(s)/stepparent(s)? Examples: health or auto insurance, room and board, clothing, use of a vehicle, etc. Please identify the type of support and its approximate value.

Source	Amount	Source	Amount
Health Insurance		Use of Vehicle	
Auto Insurance		Clothing	
Rent/Room and Board		Other	

4. Do your parents/stepparents own the property in which you reside?  Yes  No

Part II. Complete the following budget based on average monthly figures for the period of January 1, through December 31, 2008.

INCOME SOURCE	MONTHLY INCOME	EXPENSES	MONTHLY EXPENSE
Employment	\$	Housing	\$
AFDC/TANF		Food	
VA Benefits		Transportation	
Social Security		Utilities	
Child Support		Personal	
Food Stamps		Tuition/Fees	
Other		Other	
TOTAL	\$	TOTAL	\$

Part III. Please explain briefly what your circumstances are for requesting a change in your dependency status. Use the back if additional space is needed.

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I hereby certify that the information I have submitted is true and correct. **Warning:** If you purposely give false or misleading information on this application, you may be fined, sentenced to jail, or both.

Signature \_\_\_\_\_ Date \_\_\_\_\_



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*For office use only:*

Previous Dependency Override     Yes                     No  
Dependency Override             Approved            Denied

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Counselor's Signature

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Date