



Dependency Change Request
2019 – 2020

Student Name: _____ TCU ID # _____

Phone Number: _____ Email Address: _____

This form is for a financial aid applicant who is self – supporting to petition the Office of Scholarships and Student Financial Aid to authorize him or her to file the Free Application for Federal Student Aid (FAFSA) as independent although he or she does not meet the definition of an independent student as prescribed by the U.S. Department of Education. Any circumstances must be adequately documented. If TCU approves your request for a dependency status change, it will only be valid at TCU.

Please Note: The Department of Education has identified conditions that, individually or in combination with each other, DO NOT merit a change in dependency status, such as parent’s refusal to contribute to a student’s education, a parent’s unwillingness to provide income information, a parent not claiming a student as a dependent for tax purposes, or a student demonstrating financial self – sufficiency.

1. You must submit to our office copies of the Tax Return Transcripts of the two most recent tax returns you filed, with attached W-2 forms.
Mark if you did not file a tax return for: 2016 2017
2. You must also submit two references by any of the following persons who can verify your situation: close relative with whom you are not presently living, High School counselor, teacher, principal, or superintendent; Tax account and/or attorney; Person(s) with whom you reside; Director of Student Outreach Program; Pastor; another professional who has knowledge of your situation.
Make sure any submitted references include your name and TCU ID #, and the following information: how long the reference has known you, a description of their relationship to you, and their own statement about your current living/financial situation.
3. You must submit a letter to our office explaining in detail what your circumstances are for requesting a change in your dependency status. Include information such as: Where do your parents reside, and when was the last time you had contact with either of them? What is the reason that your parents do not provide housing / support? What is the reason your parents refuse to help with your education? What reasons can you give to substantiate independence from your parents support?
4. Did you live with either parent during the past calendar year? Yes No
If yes, When? _____
5. Have you received in the past year any financial support from your parents (payment of bills, cash for expenses, etc.)? Yes No
If yes, indicate the amount \$ _____ and the date you received it _____

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6. Will anyone besides yourself claim you as a Tax Exemption on his or her tax return in the past two years? Yes No

If yes, what is his or her name and what is their relationship to you? _____

7. What is your current permanent address? _____

How long have you lived there? _____

Is the residence listed above owned by a relative? Yes No

If yes, how are you related? _____

If you reside with someone, provide the following information about that person(s):

Name: _____ Relationship: _____

Length of Joint Residency: _____

| Income Last Calendar Year | Average Monthly Amount | # of Months Received Last Year |
|--|------------------------|--------------------------------|
| Work | | |
| Unemployment Compensation | | |
| Social Security or Disability Benefits | | |
| Veteran's Benefits | | |
| Child Support | | |
| Pension | | |
| AFDC / TANF (welfare) | | |
| Food Stamps | | |
| Other Cash Received | | |
| Other | | |
| TOTAL Monthly Income | | XXXXXX |

| Expenses Last Calendar Year | Average Monthly Amount | Is This Bill in Your Name? | Who Paid This Bill? |
|----------------------------------|------------------------|----------------------------|---------------------|
| Housing | | | |
| Food (purchased by you) | | | |
| Car / Transportation | | | |
| Telephone / Cell Phone | | | |
| Utilities (Gas, Water, Electric) | | | |
| Insurance (Auto, Health) | | | |
| Child Day Care | | | |
| Credit Cards | | | |
| Other | | | |
| Total Monthly Expenses | | XXXX | XXXXX |

Do your average monthly expenses exceed your average monthly income? Yes No

