TOMPKINS CORTLAND COMMUNITY COLLEGE

Dependency Override

Name _____ ID# _____

On your 2025-2026 FAFSA you have stated yes to one of the following items below, which has made you independent. **You will need to provide proof for the highlighted item below within 60 days of enrolling in classes.** If this is information is not correct please go back onto the FAFSA and change the answer from yes to no and input all parent information, income, and parent signature. If you previously provided the documentation proving your independence please contact our office. **If we do not receive the documentation, after the 60 days the independent review will be denied and you will need to provide parent information on the FASFSA to receive aid.** Please select the appropriate option and submit this form. Your supporting documentation can be mailed, emailed, or dropped off in our office. ***Select the option below that best meets your situation.***

- ○ **Legal Guardianship** - A court's decision that the student was in legal guardianship immediately before they reach the age of being an adult in the student's state. ***This does not include custody agreements of any kind***. The court paperwork needs to specifically state student is in legal guardianship. Please provide us with a copy of the court document.

- ○ **Legal dependent you support** – A person living with you (not a spouse or a child) and you provide more than half of their support as of the date you signed the FAFSA and will continue to do so for the year. Provide proof that you support them and they currently live with you and their relationship to you.

- ○ **Emancipated Minor** – A student no longer in the custody of their parent or legal guardian. Provide court documentation showing you are an emancipated minor. The court order must still be effect at the time you filed your FAFSA from your state of legal residence

- ○ **Orphan, foster care or ward of the court** - At the age of 13 or older if a student was orphaned, in foster care or was a ward of the court they will be considered independent. Provide a copy of the court papers or death certificates

- ○ **Homeless** – At any time on or after July 1, 2024, did your High School homeless liaison, director of an emergency shelter funded by the US Dept. of Housing and Urban Development, or a director of a runaway or homeless center determine you were an unaccompanied youth who was homeless; or were self-supporting and at risk of being homeless. Provide a statement supporting this from one of the agencies listed above.

- ○ **If none of these apply to you and you feel you have unusual circumstances, please email us at aid@tompkinscortland.edu.**

Signature _____ Date _____

Tompkins Cortland Community College Financial Aid Office | P.O. Box 139, 170 North Street | Dryden, New York 13053-0139
Phone: 607.844.6580 | Toll Free: 888.567.8211 | E-mail: aid@tompkinscortland.edu Fax:607.844.6538