

Kodiak Corner/Student Financial Services

Phone: (425) 352-8860 • Fax: (425) 352-8564 • Email: finaid@cascadia.edu

2025-2026 PETITION TO REQUEST DEPENDENCY OVERRIDE

NAME: _____

SSN: _____

EMAIL: _____

PHONE: _____

Financial aid regulations require that the family has primary responsibility for meeting the educational costs of a student. If you are considered a dependent according to the financial aid definition, your aid eligibility is determined by using parent income and asset information in addition to your information. Dependent students are required by law to provide parental information and signatures to be considered for financial aid.

Occasionally, due to extraordinary circumstances, students cannot obtain parental information. If you cannot provide this for some unusual reason, you may submit this form (and back-up documentation) to have your circumstances reviewed for consideration of independent status.

A financial aid office in very unusual or extraordinary circumstances, can consider a student independent. Listed below are some circumstances where we would **not** consider a student independent:

- You do not reside with your parents.
- Your parents are unable to pay for education.
- Your parents are unwilling to complete the FAFSA and/or refuse to pay for your college education.
- You have been living on your own and do not rely on your parents for support, financially or otherwise.

DOCUMENTATION REQUIRED

1. Prepare, on a separate sheet of paper, your answers to the following four questions. Be sure to respond to each question in its own paragraph. Title each paragraph with the corresponding question you are answering below:
 - a. Identify the location of both your parents.
 - b. Describe the last time you had contact with each of your parents, including when, where, and the nature of your contact. Please also indicate the frequency of your communication with your parents.
 - c. Explain why you **cannot** obtain parental information. Be specific.
 - d. Explain when and how you started meeting living and other expenses without parental support?
2. Provide signed statements from two responsible adults who are aware of your situation and can speak to the information you present. Examples of such persons would include clergy, social workers or other social service personnel, court officials (or copies of court documents), teachers or high school counselors and police officers. **At least one statement must be from someone who is not a relative or friend.**

Name (First Reference)

Name (Second Reference)

Job Title

Job Title

Address

Address

Telephone

Telephone

Relationship to you

Relationship to you

3. Once you have completed your petition and have all documentation, schedule an appointment to meet with the financial aid office.

STUDENT CERTIFICATION

I understand that:

1. Appeals to apply without parental information are not granted solely based on being self-supporting
2. Appeals approved by Cascadia are not honored by other schools
3. Appeals, when approved, must be reaffirmed each year and continued approval is not guaranteed
4. I will receive a written response to my appeal
5. Appeals may take up to four weeks to review and process
6. ***I certify that the information provided is true and correct and if I purposefully provide false or misleading information in connection with my application for federal aid, I may be subject to a fine of up to \$10,000, imprisonment for up to 5 years, or both.***

Student Signature: _____

Date: _____

Cascadia does not discriminate based on, but not limited to: race, color, national origin, citizenship, ethnicity, language, culture, age, sex, gender identity or expression, sexual orientation, pregnancy or parental status, marital status, actual or perceived disability, use of service animal, economic status, military or veteran status, spirituality or religion, or genetic information in its programs, activities, or employment, and is prohibited from discrimination by college policy and state and federal law. For more information visit www.cascadia.edu/ND

For Student Financial Services Office Use Only

- ☐ **Approved**
- ☐ **Denied**
- ☐ **Deferred**

Comments:

FAO Signature

Date: