

Student's Name: _____ IRSC ID: _____

Potential Circumstances Continued:

I have extenuating circumstances that are not listed above. Briefly explain your situation below. If your situation is determined to be extenuating (according to Federal guidelines), you will be **required** to provide additional documentation.

CERTIFICATION

I understand that submission of a Dependency Override Form to the Financial Aid Office does not guarantee I will be declared an independent student and **no approval** will be considered **without documentation**. I understand this information must be review and approved by the Director of Financial Aid. By signing this application, I certify that the information on this form and contained within the supporting documentation is true, correct and complete to the best of my/our knowledge.

Student's Typed Name _____ Date _____
(This will serve as your electronic signature)

UPLOAD ALL DOCUMENTS TO YOUR MYPIONEER PORTAL (under the dependency documents link. If the link is unavailable, drop off to your nearest campus.

FOR OFFICE USE ONLY:

Review Date _____ Review By _____ Approve Deny Cancel Request

IRSC is an EA/EO educational institution.