

**2024-2025 Request for Change in Dependency Status  
(FAFSA or CADAA)****Last Name****First Name****MI****Palomar ID Number**

The Financial Aid Office is required by federal law (Public Law 110-315 dated 8/14/08) to consider parent information and expect an official calculation of expected parental contribution for students unless the student meets one of the following conditions:

Were you born before Jan. 1, 2001?	Yes	No
Are you married? (Also answer "Yes" if you are separated but not divorced.)	Yes	No
At the beginning of the 2024–25 school year, will you be working on a master's or doctorate program?	Yes	No
Are you currently serving on active duty in the U.S. armed forces for purposes other than training? (If you are a National Guard or Reserves enlistee, are you on active duty for other than state or training purposes?)	Yes	No
Are you a veteran of the U.S. armed forces?	Yes	No
Do you have children or dependents who will receive more than half of their support from you between July 1, 2024, and June 30, 2025?	Yes	No
At any time since you turned age 13, were both your parents deceased, were you in foster care, or were you a dependent or ward of the court?	Yes	No
Has it been determined by a court in your state of legal residence that you are an emancipated minor or that someone other than your parent or stepparent has legal guardianship of you?	Yes	No
At any time on or after July 1, 2023, were you determined to be an unaccompanied youth who was homeless or were self-supporting and at risk of being homeless, as determined by (a) your high school or district homeless liaison, (b) the director of an emergency shelter or transitional housing program funded by the U.S. Department of Housing and Urban Development, or (c) the director of a runaway or homeless youth basic center or transitional living program?	Yes	No

**If NONE of the above criteria apply to you, you are a DEPENDENT student.**

The DOE (Department of Education), allows schools to exercise "Professional Judgment" in determining a student's dependency status in certain situations where the relationship between you and your parent (s) has been compromised in a serious and ongoing way.



The following are **examples** of circumstances that may be considered for a Dependency Override:

- An abusive family environment
- Incarceration or institutionalization of both parents
- Abandonment and/or estrangement by parents
- Parents cannot be located



The following circumstances would **NOT** be considered for a Dependency Override:

- Parents refusal to contribute to the student's education
- Parents do not claim the student as a dependent for income tax purposes
- Parents unwillingness to provide information on the FAFSA/CADAA or for verification
- Student demonstrates total self-sufficiency

If you feel you can substantiate an extenuating circumstance please submit the following required documentation:

1. **PERSONAL STATEMENT OF EXPLANATION**
2. **AFFIDAVIT IN LIEU OF PARENTS INFORMATION** One (1) "Affidavit In Lieu Of Parent Information" from a third party (such as a clergy, teacher, counselor, social worker, medical professional, court official) to support your claim; and
3. **SUPPORTING DOCUMENTATION** (Court/Legal documents if applicable)

\*\*\*\*\*FOR OFFICE USE ONLY\*\*\*\*\*

☐ Approved ☐ Denied Date: \_\_\_\_\_ Reviewer Signature: \_\_\_\_\_



Financial Aid, Veterans & Scholarship Services

**2024-2025 Request for Change in Dependency Status  
(FAFSA or CADAA)**

For Office Use Only

Last Name

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**Personal Statement of Explanation**

Please explain your unusual circumstances. Be sure to include why you are not able to provide parental information, when you last had contact and lived with you parent (s), your current living situation and any documentation you have to support your statements. *(If you need additional space, use the back of this form.)*

**I hereby certify that the above statement is true and correct.**

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

***Submit in person to the Palomar College Financial Aid Office -or- scan & email us from your Palomar Student Email Account to [finaid@palomar.edu](mailto:finaid@palomar.edu).***

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**AFFIDAVIT IN LIEU OF PARENTS INFORMATION**

***The student named above has indicated on their application for federal financial aid that he or she is unable to provide parent information due to unusual circumstance. Please complete this form in support of their claim***

Declarant's Name: \_\_\_\_\_ Occupation: \_\_\_\_\_

Relationship to Student: \_\_\_\_\_ Length of Relationship [Years/Months]: \_\_\_\_\_  
(Cannot be a friend/family member)

Email: \_\_\_\_\_ Phone# \_\_\_\_\_

***Please provide a brief statement regarding your knowledge of the student's family history including their relationship with parents.***

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***Why is the student unable to provide parent information for financial aid purposes?***

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***To your knowledge, when was the last time the student;***

- Received financial Support from parent(s) [Month/Year] [\_\_\_\_]/[\_\_\_\_]
- Lived with parent(s) [Month/Year] [\_\_\_\_]/[\_\_\_\_]

\_\_\_\_\_  
Signature of Declarant\_\_\_\_\_  
Date



Financial Aid, Veterans & Scholarship Services  
**2024-2025 V-1 Verification Worksheet – Independent**

For Office Use Only

The U.S. Department of Education and/or Palomar College selected your application for review in a process called “Verification.” In this process, we are required by law to compare information from your FAFSA with the information provided on this form and all requested financial documentation. Corrections may be deemed necessary. ***We cannot process your financial aid until verification has been completed. Please provide the required documents as soon as possible and read all instructions carefully before completing this worksheet to avoid delaying your financial aid awards.***

Last Name

First Name

MI

Palomar ID Number

**INSTRUCTIONS:**

Step 1: Collect and attach **ALL** required documentation (see “Required Documentation” below).

Step 2: Complete and sign the form.

Step 3: Make **PHOTOCOPIES** of required documents and submit in person to the Palomar College Financial Aid Office **-or-** scan and email to us from your **Palomar Student Email Account** to [finaid@palomar.edu](mailto:finaid@palomar.edu)

**REQUIRED DOCUMENTATION**

**STUDENT/SPOUSE DOCUMENTATION REQUIRED**

**A. If you or your spouse (if any) FILED taxes for 2022 (or were required to file taxes), please attach:**

- A **PHOTOCOPY** of the 2022 Tax Return Transcript (*a document issued by the IRS*).

*We will also accept a signed copy of your 2022 Federal Income Tax Return submitted to the IRS in lieu of a tax transcript*

- ◇ To order a 2022 Tax Return Transcript online: <http://www.irs.gov/individuals/Get-Transcript>.
- ◇ To order a 2022 Tax Return Transcript by phone: 1-800-908-9946.
- ◇ If you used the Federal Tax Information (FTI) Tool (consent to transfer your tax data to your FAFSA) successfully when completing your FAFSA online, we DO NOT need your or your spouse’s tax transcripts.

----- **OR** -----

**B. Non-Filers:**

- If you or your spouse (if any) worked in 2022, but **DID NOT** file taxes, attach a **PHOTOCOPY** of **ALL** 2022 W-2 and/ or 1099 forms or IRS Wage and Income Transcript for the person that worked, but did not file taxes.
- Request the “Verification of Non-filing Letter” from the IRS <http://www.irs.gov/individuals/Get-Transcript> or by phone 1-800-908-9946.

## Family Information

List all of the people in your household in the table below. Include:

- Yourself;
- Your spouse (if any);
- Your children if you will provide more than half of their support from July 1, 2024 through June 30, 2025, or if the children would be required to provide parental information if they were completing a FAFSA for 2024-2025. Include children who meet either of these criteria, even if they do not live with you; **AND**
- Other people if they currently live with you and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2024 through June 30, 2025.

Full Name	Age	Relationship	If this person will be attending college at least half-time from July 1, 2024 to June 30, 2025, please write the name of the college here.
		<i>Myself</i>	<i>Palomar College</i>

\*If you need more space, attach a separate page with your name and Student ID Number at the top.

## Income Information

STUDENT INCOME	SPOUSE INCOME (if any)
1a. Did <b>you</b> earn any income from employment in 2022? <input type="checkbox"/> YES <input type="checkbox"/> NO	1b. Did <b>your Spouse</b> (if any) earn any income from employment in 2022? <input type="checkbox"/> YES <input type="checkbox"/> NO
2a. Were <b>you</b> required to file a US tax return for 2022? <input type="checkbox"/> YES. See section A for instructions on Page 1. <input type="checkbox"/> NO. See section B for instructions on Page 1.	2b. Was <b>your Spouse</b> (if any) required to file a US tax return for 2022? <input type="checkbox"/> YES. See section A for instructions on Page 1. <input type="checkbox"/> NO. See section B for instructions on Page 1.
3. Did you or your spouse (if any) earn any income from employment in a foreign country in 2022 and either did not file a foreign tax return or filed a foreign tax return? <input type="checkbox"/> YES, and did not file a foreign tax return. Indicate amount earned, translated into US dollars, and country earned in: \$_____ in _____. <input type="checkbox"/> YES, and filed a foreign tax return. You <b>MUST</b> submit a <b>PHOTOCOPY</b> of your or your spouse's (if any) foreign tax return <b>AND</b> the Palomar Foreign Income Conversion Form (found at <a href="https://www2.palomar.edu/pages/fa/forms/">https://www2.palomar.edu/pages/fa/forms/</a> ). Convert all figures to US dollars, using the exchange rate in effect on the day you completed your FAFSA. <input type="checkbox"/> NO, my spouse (if any) or I did not earn any income from employment in a foreign country.	
4. Did you or your spouse file a Schedule 1 on your 2022 tax return? <input type="checkbox"/> YES <input type="checkbox"/> NO	5. Are you or your spouse a Dislocated Worker? <input type="checkbox"/> YES <input type="checkbox"/> NO

## Certification

Signing this form certifies that the information reported is complete and correct and that any false statement or failure to provide proof when asked may be cause for delay, denial, reduction or withdrawal of financial aid.

**Warning: purposely giving false and/or misleading information may be cause for a fine, sentence to jail or both.**

Student Signature

Date

Submit via email to the Palomar College Financial Aid Office. Please scan and email to us from your Palomar Student Email

Account to [finaid@palomar.edu](mailto:finaid@palomar.edu)