



File your 2020-2021 FAFSA or CADAA application prior to submitting this form.

<b>A. Student Information</b>	
Student's Name: _____	FRC ID: _____

<b>B. Aid Application</b>	
<input type="checkbox"/> FAFSA Application	<input type="checkbox"/> CADAA Application

<b>C. Information</b>
<p>This request is <u>only</u> for students who had an <b>approved</b> Dependency Override Appeal at Feather River College for the 2019–2020 academic year. <b>Note:</b> if you previously completed a Dependency Override due to homelessness or self-supporting and at risk of homelessness or similar circumstances, please <b>stop</b> and contact the Financial Aid Office.</p> <p>A student with an <b>approved</b> Dependency Override Appeal for the 2019-2020 aid year at FRC who does not meet the federal criteria for independent status on the 2020-2021 FAFSA or CADAA application may submit this Dependency Override Renewal Request. Upon receipt of your request, our office will determine if circumstances continue to exist for granting independent status.</p> <p>I understand that if my Dependency Override Renewal Request is approved additional documents may be required to complete my financial aid application (<i>once FRC has updated my FAFSA or CADAA application to reflect my Independent Status</i>). I am responsible for submitting all requested documents in a timely fashion.</p>

<b>D. Personal Statement</b> – In the space below, provide a detailed explanation of the unusual & extenuating circumstances that remain unchanged, which led to your approved independent status during 2019-2020. If you require additional space, please attach pages as necessary.
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<b>E. Certification and Signatures</b> – The person signing this worksheet certifies that all of the information reported on it is complete and correct. The student whose information was reported on the FAFSA or CADAA must sign and date. <b>Warning!</b> If you purposely give false or misleading information you may be fined, sentenced to jail, or both.
<b><u>This worksheet must be signed and dated to be valid. Electronic and/or digital signatures are not valid.</u></b>
Student Signature: _____ Date _____

<b>For Office Use Only</b>	
<input type="checkbox"/> D/O Renewal Approved	<input type="checkbox"/> Update RNAOV21 <i>dependency</i> field to “I” for independent
<input type="checkbox"/> D/O Renewal Denied	
Comment(s) Supporting Decision:	
Processed/Reviewed By: _____	Date: _____