

DALLAS COLLEGE

2024-2025 DEPENDENCY OVERRIDE RENEWAL

Scanning:

Doc Category: Grants

Doc Type: Dependency
Change

Status: New

Award Year: 2024

Return this form to the FA Secure Drop Site – Contact Financial Aid at (972) 669-6400 or financialaid@dcccd.edu for upload link.

| Last name | First | M.I. | Student ID # |
|---|--|--|---|
| Address | | | Email |
| City | State | ZIP Code | Primary Contact # |
| approved by Dallas C difficult/impossible to | College in a prior awar o provide their inform rm completed and sign | d year relating to your re ation on your FAFSA ap | ation. You have had a dependency override elationship with your parents making it oplication. For consideration for the current elation may be requested upon review but is |
| Please initial below: | | | |
| | tion has not changed findent by Dallas Colle | | nat my dependency status was changed from |
| I am reo | uesting this for the 20 | 24-2025 academic year. | (Fall Semester May Semester) |
| | | | is complete and correct. I understand that nay result in being fined, sentenced to jail, or |
| Signature | | | Date |
| For Office Use Only Dependency Overri | : ide Renewed: | Date: | |