

Continuance of Dependency Override Decision

Student Name: _____ JC ID: _____

(Printed)

Please read the following paragraph. If all statements are true, please sign this form and return it with the required documents. If all statements are *not* true, please attach a signed explanation.

- I am requesting a continuance of the dependency decision evaluated for me last year by a Financial Aid Specialist from the Office of Financial Aid at Jackson College. The conditions under which the decision made as related to my eligibility to receive financial aid are the same as last year.
- I understand that if I give false or misleading information in connection with my application for Federal financial aid, the Office of Financial Aid reserves the right to cancel my aid and I will be responsible for any balance that may occur.

Student Signature: _____ Date: _____

After completing your FAFSA (Free Application for Federal Student Aid) application online, if conflicting information is found you *may* be required to submit additional information to our office for review. This may include but is not limited to:

- 2023-2024 Independent Verification Worksheet (IV1)
- Copy of student's 2021 tax return transcripts, W-2's for non-filers; or verification of non-filing from the IRS if you did not file a tax return for 2021.

Completed form may be returned to our secure document site:

www.jccmi.edu/securedocuments.

1. Choose Financial Aid under the Central Campus Departments heading.
2. Choose "Click here to select files from your computer" and select the required document.
3. Click "Start Upload" and wait for your document to be uploaded to Iron Box.