

**Dependency Override Request
2011 – 2012 Academic Year**

Name _____ APSU Student ID# _____

Daytime Phone Number _____

**Submission of this form requires an appointment with your Financial Aid Counselor.
To schedule an appointment, call 931-221-7907 or toll-free 1-877-508-0057**

Please check the reason you are requesting a Dependency Override and provide three sources of supporting documentation. Other documentation may be requested once your initial request is reviewed.

Reason for request: Abandonment Abuse

(This request will not be processed if all supporting documentation is not attached).

Dependency overrides are limited to cases of abuse or abandonment. Please indicate below why you feel you qualify for an override of your dependency status. Acceptable documentation would be a court order, police report, legal document or a letter from clergy, high school guidance counselor or teacher and relative that is aware of your situation. We need a minimum of two (2) sources of documentation. Once we have received all supporting documentation, a decision may take up to **30 days or longer** during fee payment and registration periods.

You will be notified via AP OneStop of the decision regarding your request.

By signing below I understand my financial aid will be terminated if I fail to submit requested documents or knowingly provide false information on any financial aid documents required by Austin Peay State University. Aid awarded on the basis of false information will be billed to me. False or fraudulent information may be reported to the Federal Office of the Inspector General and/or the University Dean of Students.

Student Signature

Date



Office of Student Financial Aid & Veterans Affairs
Ellington 216

P.O. Box 4546 * Clarksville, TN 37044

Telephone (931)221-7907 * Fax (931)221-6329 * Toll Free 1-(877) 508-0057

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