Dependency Override Renewal 2026-2027

PARIS JUNIOR COLLEGE
Greenville | Paris | Sulphur Springs

Last Name	First Name	M.I.	Student ID#
Address			Email
City	State	Zip	Contact #

Dependency Override Information

You have completed your FAFSA application but were unable to provide parental information. You have had a dependency override approved by Paris Junior College in a prior academic year relating to your relationship with your parents making it difficult/impossible to provide their information on your FAFSA application. For consideration for the current academic year, we need this form completed and signed. Additional documentation may be requested upon review but is not required for submission.

Certification Statements

Check the appropriate box for each question.

1. Did you resume living with your biological or adoptive parent(s) in the past year or current year? YES ☐ NO ☐
2. Did your biological or adoptive parent(s) claim you on their 2024 taxes as a dependent? YES ☐ NO ☐
3. Has any of your circumstances that were used to determine your original dependency override changed? YES ☐ NO ☐

**If yes, please provide a detailed written statement explaining these changes.

4. Are you requesting renewal for the 2026-2027 academic year? YES ☐ NO ☐

Required Documentation

The following documents must be submitted along with your Dependency Override Renewal request form:

- ☐ 2026-2027 FAFSA form (http://fafsa.ed.gov) – Your 2026-2027 FAFSA form must be received and all required documents (if selected) must be submitted prior to review of your renewal.
- ☐ Detailed written statement (only if you answered year to question 3.)
- ☐ 2024 Federal Tax Return Transcript or signed 2024 tax return and all schedules, if you did not consent to have your Federal Tax Information (FTI) to be transferred to be directly from the IRS to your FAFSA form.

Certification and Signature

I certify that the information on this renewal is true and correct. I understand that purposely falsifying information may lead to the cancellation of my financial aid and may prevent me from receiving future aid. I also understand that any falsification found will be reported to the Department of Education and the Attorney General's Office, and I may be prosecuted to the full extent of the law. ***Handwritten signature is required. Electronic, typed or font signatures are not acceptable.***

_____ _____

Student Signature Date