



HARDIN-SIMMONS UNIVERSITY

Request for Dependency Status Change 2018-2019

Student Name: _____ HSU ID#: _____ DOB ____/____/____

ALL STUDENTS MUST ANSWER THE FOLLOWING QUESTIONS.

USE THE REVERSE SIDE OR ATTACH A SEPARATE PIECE OF PAPER FOR FULL EXPLANATION.

1. What is the reason that your parents do not provide housing?

2. What is the reason that your parents refuse to help with your education?

3. What other reasons can you give to support your being independent of your parents support? Supporting documents required.

Did you live with either parent during the past calendar year? Yes () No () If yes, what was the last day you lived with them? ____/____/____

Do you receive now or have you received in the past year any financial support from your parents (such as money/gifts/payment of bills/etc.?)
Yes () No ()

If yes, indicate the amount for 2016: \$_____, the type _____ and when the support stopped: ____/____/____

Did you file a 2016 Federal Tax return? Yes () No () If no, why not? _____

Did your parents file a 2016 Federal Tax Return? Yes () No ()
(Please attach a copy of their return or explain the reason that you cannot attach a copy on a separate page.)

Please answer the questions below for the Summer 2018, Fall 2018, and Spring 2019 terms.

My current address is: _____

I have live at this address since: ____/____/____

This property is owned by: _____

Is this person your relative? Yes () No ()

What is their relationship? _____

Please answer the questions below concerning your monthly cost for each:

Housing: _____ Utilities: _____ Food: _____ Gas and Car Maintenance: _____ Car Payment: _____

Did you pay these costs yourself? Yes () No () From what income source are these costs paid? _____

Do you have car insurance? Yes () No () Company Name: _____
If yes, please attach a copy of the policy or the proof of insurance card in your name.

Do you have health insurance? Yes () No () Company Name: _____
If yes, please attach a copy of the policy showing that you are on the policy.

Please answer the questions below concerning income for 2016 and 2017.

	Actual 2016	Estimated 2017
How much income did you or will you earn from work?	\$ _____	\$ _____
How much other taxable income did or will you have?	\$ _____	\$ _____
How much did or will you receive in unemployment benefits?	\$ _____	\$ _____
How much did or will you receive in Social Security benefits?	\$ _____	\$ _____
How much did or will you receive in Temporary Aid to Needy Families? (TANF)	\$ _____	\$ _____
How much other untaxed income and benefits (child support, etc.) will you have?	\$ _____	\$ _____

Name & Address of Employer: _____

CERTIFICATION: I certify that all of the information on this form is true and complete to the best of my knowledge. I understand that if all the information requested above is not supplied that no action will be taken on this request. If requested by an authorized official, I agree to give proof of the information that I have given on this form. I also understand that any suspected fraud will be reported to the appropriate authorities and the Office of the Inspector General of Investigation.

No student or prospective student will be excluded from participation in or be denied the benefits of financial aid at Hardin-Simmons University on the basis of race, color, age, national origin, or gender.

You should have attached the following:

1. Copy of your 2016 Tax Return & W-2s
2. Copy of your parents' 2016 Tax Return & W-2s (if available)
3. Copy of monthly expense receipts (housing, utilities, food, car, etc.)
4. Copy of insurance policy
5. Copy of health insurance policy
6. Explanations of why you cannot submit any of these items
7. Three references of persons who can verify your situation.

IF DOCUMENTATION IS NOT SUBMITTED, THE REQUEST WILL NOT BE CONSIDERED.

Student's Signature: _____ Contact Phone Number: _____ Date: ___/___/___

Financial Aid Office Use ONLY:

Action Taken: _____

Financial Aid Office Signature: _____ Date: ___/___/___

Update Sent: _____ Update Returned: _____ Letter Sent: _____