



# 2021-2022 Dependency Override Affirmation Form



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Student Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_

In the previous year \_\_\_\_\_ I was granted a dependency override from the Financial Aid Office at Orange County Community College. According to Federal regulations, “not only do dependency overrides not carry over from one school to another, they do not carry from one year to the next; if the student is not independent for some other reason, the Financial Aid Office must reaffirm each year that the unusual circumstances persist and that an override is still justified”.

Please sign below:

I, \_\_\_\_\_ reaffirm that the circumstances I  
(print name)  
used to support my petition for Independence included in the documentation submitted, still exist.

Student Signature: \_\_\_\_\_

Student ID#: \_\_\_\_\_ Date: \_\_\_\_\_

**WARNING: If you purposely give false or misleading information on the worksheet, you may be fined, be sentenced to jail, or both.**

