Dependency Change Request Packet 2027-2028

Revised: 11/3/26

INSTRUCTIONS: Please Read and Follow the Instructions Carefully

Federal financial aid regulations assume that the family has primary responsibility for meeting the educational costs of students. For this reason, those who are defined by the FAFSA to be dependent students are required to provide parental information and a parent's signature in addition to their own.

Exceptions to the dependency rules are those rare instances where it can be proven that there has been a "total breakdown" in the student-parent relationship. Examples of "total breakdown" include parental abandonment, or the removal of the student from the home due to an abusive environment. If you believe that you have experienced a total break in the relationship with your parent, you must provide the following items to the Financial Aid Office.

1. Complete the "**Dependency Change Request Form**" which includes the student's personal information and a detailed statement from the student explaining why they wish to have a change of dependency status.

2. A student must have already completed a FAFSA online at www.fafsa.gov.

3. Submit two references that are aware of your circumstances (Youth Minister, Pastor, High School Counselor, etc.). Please use the Reference Forms that are included in this packet.

Please note the following information regarding your request:

- Federal regulations do not allow for a change in dependency status simply because a student's parents are unwilling to provide financial information for the FAFSA or are unwilling to support a student's educational expenses.
- Please neatly complete the entire form. Do not leave any sections blank.
- Be as detailed as possible when explaining your personal situation and why you are requesting a change of dependency status.
- Please submit any extra documentation that you have regarding your situation that you feel might be helpful in making a decision regarding your change of dependency request.
- Completing the FAFSA incorrectly can seriously delay the processing of your application.
- The Financial Aid Office will carefully consider your request and will make a decision according to the federal regulations that we are required to follow given your unique situation.
- If you have any questions, please email the Financial Aid Team at financialaid@nelson.edu or call at (972)825-4730.
- Your completed request form, two references, and supporting documentation can be turned in by:

Mail:	Nelson University, Attn: Financial Aid, 1200 Sycamore St, Waxahachie, TX 75165
Email:	financialaid@nelson.edu
Fax:	(682)224-8644
In Person:	The Financial Aid Office is located in the Davis Building.

Dependency Change Request Form 2027-2028

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This form and supporting documentation can be submitted via:
Mail: Nelson University, Attn: Financial Aid, 1200 Sycamore St, Waxahachie, TX 75165, **Fax:** (682)224-8644, **Email:** financialaid@nelson.edu

Student's Full Name _____

Social Security # _____ Birthday _____

Email Address _____ Phone _____

Address _____

City _____ State _____ Zip _____

Did you complete this same Dependency Change Request Form in a prior year? ❑ Yes ❑ No

Where have you been living? Who have you been living with? _____

Enter the Month and Year that you last lived with: Father _____ Mother _____

Enter the Month and Year that you last received support from: Father _____ Mother _____

Explain how you supported yourself after independence from your parents. _____

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Describe in detail your present situation and the reason for requesting a change of dependency status. If more room is needed, please attach an additional page. _____

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By signing below, I certify that the information provided on this statement is true and complete.

Student's Signature _____ Date _____

Financial Aid Office Use Only:

Approved _____ Denied _____ Fin Aid Officer _____ Date _____

Reference Form for Dependency Change 2027-2028

Revised: 11/3/26

The applicant identified below has requested a change in their dependency status for the purpose of determining eligibility for federal financial aid. You are being asked to serve as a reference for the application process. Please complete and return this form to Nelson University's Financial Aid Office.

Mail: Nelson University, Attn: Financial Aid, 1200 Sycamore St, Waxahachie, TX 75165, **Fax:** (682)224-8644, **Email:** financialaid@nelson.edu

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Student's Full Name _____

Reference's First and Last Name _____

Email Address _____ Phone _____

Address _____

City _____ State _____ Zip _____

1. Identify your relationship to the applicant. _____
2. How long have you known the applicant? _____
3. With whom does the applicant currently live? _____
4. Please explain what you know about the applicant's relationship with his/her parents? If you need more space, please attach a separate page. _____

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To the best of my knowledge, I certify that the information provided is true and complete. I also understand that I may be contacted if further information is required.

Reference's Signature _____ Date _____

Reference Form for Dependency Change 2027-2028

Revised: 11/3/26

The applicant identified below has requested a change in their dependency status for the purpose of determining eligibility for federal financial aid. You are being asked to serve as a reference for the application process. Please complete and return this form to Nelson University's Financial Aid Office.

Mail: Nelson University, Attn: Financial Aid, 1200 Sycamore St, Waxahachie, TX 75165, **Fax:** (682)224-8644, **Email:** financialaid@nelson.edu

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Student's Full Name _____

Reference's First and Last Name _____

Email Address _____ Phone _____

Address _____

City _____ State _____ Zip _____

1. Identify your relationship to the applicant. _____
2. How long have you known the applicant? _____
3. With whom does the applicant currently live? _____
4. Please explain what you know about the applicant's relationship with his/her parents? If you need more space, please attach a separate page. _____

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To the best of my knowledge, I certify that the information provided is true and complete. I also understand that I may be contacted if further information is required.

Reference's Signature _____ Date _____