



**Kean University**  
**Office of Financial Aid**  
**1000 Morris Avenue**  
**Union, NJ 07083**

**Dependency Override Certification**

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

The Office of Financial Aid has received your 2017-2018 FAFSA. However, on the application, your parental information is missing. If you would like to be considered for a dependency override as in a previous year, please check and sign the following:

\_\_\_\_\_ I am a continuing student and have provided documents for an approved dependency override in a previous year. I certify that my situation is still the same as indicated in the dependency override documents. Please process my FAFSA status as an independent student.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Phone #