

2017-2018 Dependency Override Renewal

SECTION A. STUDENT INFORMATION		
Name:	UNTD Assigned ID:	SSN (last 4 digits only):
SECTION B: INSTRUCTIONS		
Please follow the steps below to be con	nsidered for a renewal Depe	endency Override. Your application will not
be reviewed unless all requirements are	e met.	
1. Complete the certification in Se		1/EAEGAN 'C
* * * * * * * * * * * * * * * * * * * *		d (FAFSA), if not already submitted.
3. Return all documents to our off	ice.	
CECTION C. CEDTIFICATION		
SECTION C: CERTIFICATION		
1 0	1 0	at the University of North Texas. I certify
•	1 .	equest to be considered as an independent
1 1	_	d return this form for my financial aid to be
processed. Electronic signatures are i	not accepted.	
Student Signature	Date	
21000111 2181111111	Duit	
X		