

## 2018-2019 Dependency Override Renewal

SECTION A: STUDENT INFORMATION

Name:	UNTD Assigned ID:	SSN (last 4 digits only):
SECTION B: INSTRUCTIONS		
	-	ndency Override. Your application will not
<ol> <li>Complete the certification in S</li> <li>Complete a paper Free Applica</li> <li>Return all documents to our of</li> </ol>	ation for Federal Student Aid	(FAFSA), if not already submitted.
SECTION C: CERTIFICATION		
that my family situation remains the sa	ame as the previous year. I renderstand that I must sign and	at the University of North Texas. I certify equest to be considered as an independent I return this form for my financial aid to be
Student Signature	Date	
Y		