



**C. Supporting Documentation (for new requests only):**

- Submit at least two (2) letters from reliable third parties who can support and verify your circumstances. The parties writing on your behalf must have first-hand knowledge of your situation and describe it fully. (Reliable third parties may include, but are not limited to counselors, members of the clergy, social workers, teacher, attorney, etc)
- Any other documentation you would like to submit to support your request. (Examples include police reports, court papers, etc)

**Please Note:** Federal guidelines regarding dependency overrides clearly indicate the following situations do not qualify as extenuating circumstances and therefore would not result in a dependency override.

1. Parents refusing to contribute to the student's education.
2. Parents unwilling to provide information on the application or for verification.
3. Parents not claiming the student as a dependent for income tax purposes.
4. Student demonstrating total self-sufficiency.
5. Situations within your control (ex. Parents did not like the person you were dating so you moved out)

Based on the documentation you submit, the Appeals Committee will make a decision regarding your status. The federal government has left the final decision on independence to financial aid personnel at each college. You have the burden to prove your independence and that it was either beyond your control or in the best interest of your physical and/or psychological well-being to leave your parents household.

If you have any questions regarding this form, or would like to speak with a financial aid counselor about your situation, please contact our office at (518) 244-4525 (Troy) or (518) 292-1783 (Albany).

You will be notified by the financial aid office once a decision has been made with any further instruction if necessary.

**All students must sign the certification below:**

**I certify that the information provided is true and accurate to the best of my knowledge. I consent to the verification by The Sage Colleges, of any statement made herein. I also understand that the decision of the committee is final.**

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**Student Signature**

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**Date**

Return Form To:

The Sage Colleges  
Financial Aid Office  
65 First Street  
Troy, NY 12180  
Fax: (518) 244-2460

The Sage Colleges  
Financial Aid Office  
140 New Scotland Avenue  
Albany, NY 12208  
Fax: (518) 292-7701