

Financial Aid Dependency Status Change Request

[Your Name]
[Your Address]
[City, State, Zip]
[Email Address]
[Phone Number]
[Date]

[Financial Aid Office]
[Institution Name]
[Office Address]
[City, State, Zip]

Dear Financial Aid Officer,

I am writing to formally request a review of my dependency status for financial aid purposes. My name is [Your Name], and my student ID is [Your Student ID]. Due to [brief description of circumstances, e.g., changes in my financial situation, living arrangements, or personal circumstances], I believe that my dependency status should be reassessed.

I have attached [list any supporting documents, e.g., tax returns, court documents, etc.] to provide evidence for my request. I kindly ask that you review my situation at your earliest convenience, as it is crucial for my ability to continue my education.

Thank you very much for your attention to this matter. I look forward to your prompt response.

Sincerely,
[Your Name]
[Your Student ID]