

www.lincoln.edu

Office of Financial Aid

1570 Baltimore Pike Lincoln University, PA 19352-0999

800-561-2606 phone **484-365-8198** fax financialaid@lincoln.edu

2023-2024

Office of Financial Aid Request for Dependency Override Continuation

If you have requested and because you will need to complete the	en approved for a Dependency Override pe statement below:	prior to 2023-2024 academic year,	
I	certify to the fact that my circur	_ certify to the fact that my circumstance(s) for independency has not	
print fullname changed since last academic	e year.		
Below plea	se provide a typed detailed statement of y	our current situation.	
By signing this statement, I a	cknowledge that I may need to re-verify	my independency every academic year.	
Student's Signature	Student ID #	Date	