

2026-2027
Continuation of Independent
Status Form



Student Information

| | | | |
|-------------------|------------|------------|------|
| Student ID Number | Last Name | First Name | M.I. |
| Street Address | City | State | Zip |
| Home Phone | Cell Phone | | |

I certify that the conditions that resulted in an approval of my independent status for the current academic year continue to exist. I thereby request a continuation of my dependency status override for the 2026-2027 academic year. I understand that Financial Aid Services has the right to request additional supporting documentation if needed.

I understand that I must submit this *Continuation of Independent Status Form* and complete a 2026-2027 Free Application for Federal Student Aid (FAFSA) online at www.studentaid.gov by March 1, 2026 in order to receive maximum priority consideration for financial aid.

By signing this worksheet, I certify that all the information reported is complete, true, and correct to the best of my knowledge.

Student Printed Name

Student Signature

Date

Please complete this form, then upload the completed form at umassd.verifymyfafsa.com

Steps for uploading this form:

1. Print and complete this form.
2. After completing, save a copy by creating a scanned image of your completed document or taking a clear digital photo.
3. Upload the scanned image at umassd.verifymyfafsa.com
4. After you have uploaded your document, confirm the image is clear and readable before submitting.
5. You will have the option to delete uploaded files or add more pages if necessary.