



2021-22 Special Circumstance Review Request

Student's Name _____ Student ID _____
Last
First

Your **2021-22** financial aid is based on **2019** income reported on the Free Application for Federal Student Aid (FAFSA). If your circumstances have changed since the filing of your 2021-22 FAFSA or your income is significantly different than what was reported, you may request a reevaluation of eligibility. **Both the students and parents 2019 and 2020 federal income taxes must be on file with our office for us to consider your request.** If 2020 federal income taxes have not yet been completed, then 2020 W-2 statements and documentation of income from all other sources will be required.

| Check All That Apply | Special Circumstance | Required Supporting Documentation |
|--------------------------|---|---|
| <input type="checkbox"/> | Separation/Divorce | <ul style="list-style-type: none"> ◇ Name of parent that will remain on FAFSA. (custodial parent) ◇ Documentation verifying separation or divorce (decree, court documents). ◇ Most recent pay check for custodial parent. ◇ Proof of residence for each parent. |
| <input type="checkbox"/> | One Time Payment/Non-Recurring Income | <ul style="list-style-type: none"> ◇ Clarification (e.g. IRA distribution, sale property, inheritance, Form 1099) ◇ Explanation of the one-time payment or reason for the withdrawal. |
| <input type="checkbox"/> | Death of Parent/Spouse | <ul style="list-style-type: none"> ◇ Copy of Death Certificate ◇ Billing statement from funeral home verifying expenses not covered by insurance. ◇ Copy of most recent paycheck stub for surviving parent/spouse |
| <input type="checkbox"/> | Medical Expenses *Expenses approved in a previous year will not be considered again | <ul style="list-style-type: none"> ◇ Documentation of outstanding medical bills not reimbursed or paid by insurance ◇ Explanation of expenses |
| <input type="checkbox"/> | Loss of Employment/Reduction of Income | <ul style="list-style-type: none"> ◇ Explanation of circumstances surrounding the loss of income or reduction (Include last date of employment and if the parent has found employment) ◇ Copy of the most recent paycheck stub for both parents in household if dependent or student/spouse if independent. ◇ Termination notice from employer ◇ Severance statement (if applicable) ◇ Copy of unemployment benefits statement (if applicable) ◇ Copy of Attorney General Summary for loss of child support |
| <input type="checkbox"/> | Other *e.g., educational debt, natural disaster | <ul style="list-style-type: none"> ◇ Detailed explanation of the circumstance ◇ All related documentation |

Additional Information

Please use the space below to explain any information on this form or expand upon your family's circumstances. Attach a separate document if more space is needed.

Amount of additional financial assistance requested to meet 2021-2022 educational expenses: _____

Student and Parent Certification

I/We certify that the information provided on this form is accurate and complete as of this date. I/We understand that the request of a financial aid reevaluation is not guaranteed to result in a change to my financial aid eligibility and does not release me from payment of any balance due on my student account. I/We also understand that any revision based on this appeal information does not guarantee the same adjustments will be made in future semesters and/or academic years.

Student Signature _____ Date _____

Parent Signature _____ Date _____

Please sign and submit completed form, along with supporting documentation to the Office of Financial Aid.