



2024-2025 Special Circumstance Form

Student Name: _____

Student ID# _____

The federal financial aid is based upon 2022 income information provided on the 24-25 FAFSA. We recognize that a family’s income is not always consistent from one year to the next, and that circumstances beyond a family’s control may inhibit a family’s ability to contribute to educational expenses. We welcome the opportunity to discuss a substantial change in your family’s status since the FAFSA’s reporting income information. Changes resulting from this review do not guarantee an increase in your federal aid sense a loss of income may not influence your federal aid eligibility.

Please Note: This form will not be processed until all documents have been submitted. All decisions are final.

Change of Circumstance

Please provide all the documentation indicated below for the circumstance that is applicable to you and your family.

Loss/Change of Income: Unemployment, retirement, income, etc.

Loss of Wage Earner: Divorce, Separation, Disability, untaxed Death of Parent or Spouse, etc.

-Letter explaining situation. Include:

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- Dates associated with the job or income loss
- Eligibility for unemployment, severance, Retirement, social security or other

- Dates associated with loss of wage or loss/change earner
- Eligibility for alimony or child support
- Eligibility for social security or other income

-Proof of loss of income (e.g. letter from employer)

-Documentation of loss (e.g. divorce decree or death certificate)

-Proof of current salary (e.g. recent pay stub)

-Documentation of alimony, child support, social security, or other income

-Documentation of unemployment, severance, retirement, social security or other income

-Signed copy of 2023 Federal Tax Return

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-Copy of 2023 W2s and or other income

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-Most recent paystubs

Certification and Signature

Each person signing below certifies that all the information provided is complete and correct. The student and one parent whose information was reported on the FAFSA must sign and date.

Student Signature

Date

Parent Signature (if dependent)

Date