

## FINANCIAL AID OFFICE 2019-2020 Special Circumstances Appeal

Student ID#*	Student Name	(Last Name, First Name)	

The Special Circumstances Appeal form allows you to explain changes in your family's financial situation during the 2017 or 2018 calendar year(s) and for us to review circumstances not considered when you completed the 2019-2020 FAFSA. This financial situation may be due to loss of a job, separation, divorce, death, disability, unusual medication expenses, or other circumstances. If your family has experienced a prolonged and significant decline in family income, you may be eligible for additional financial aid funds for the current academic year.

The Committee will **not** consider consumer debt (e.g., auto loans, credit card payments, foreclosure, bankruptcy) as a condition for consideration. If your appeal is approved, your eligibility for federal and/or institutional financial aid will be reevaluated. Submission of this form does not guarantee a change in your financial aid eligibility or award(s). The decision of the Financial Aid Director is **final** and cannot be appealed to the Department of Education.

#### Important!

All applications <u>MUST</u> include the following. Incomplete appeals will not be considered.

- 1. A fully completed and signed Special Circumstances Appeal Form. A reason for appeal must be selected.
- 2. 2019-2020 Verification form
- 3. A signed copy of the 2017 Federal IRS Tax Return (IRS 1040, 1040A, etc)
- 4. 2017 W-2 Earning Statement(s)
- 5. **Typed** letter of circumstances
- 6. **Additional documentation required** based on your reason for appeal. Please refer to **Reason for Appeal chart** for specific documents required

**Situations that will not be considered include; voluntary** private secondary education tuition, car payments/insurance, personal bankruptcy, loss of home equity, unemployment of less than 4 month, or consumer debt.

<sup>\*</sup>for new students, the Student ID# can be found on the Financial Aid Award Letter



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## I. REASON FOR APPEAL (PLEASE SELECT THE BOX(S) THAT BEST DESCRIBE YOUR CIRCUMSTANCES)

Select	Reason for Appeal	Please provide the following documents. If documents
One	Reason for Appear	are not available, please provide a detailed explanation.
	1. LOSS OF EMPLOYMENT/REDUCTION IN WAGES IS PROJECTED TO BE LOWEST IN 2019  Who experienced a loss of/change in income?  Father/Step Father	<ul> <li>□ Copy of most recent year to date pay stub(s)</li> <li>□ Signed and dated letter (on company letterhead) from employer listing last day of employment</li> <li>□ A statement of severance payments and benefits from your employer (if applicable).</li> <li>□ A statement detailing unemployment benefits (if applicable)</li> <li>□ If Self-employed, please provide a letter from your CPA or tax preparer to confirm your loss of business income.</li> </ul>
		☐ Estimated Income form.
	2. LOSS OF BENEFIT/NON WORK RELATED INCOME (child support, alimony, etc.)  Person receiving the benefit □ Parent □ Student  Type of Benefits Received	☐ Any appropriate documentation of termination of benefits/support/income (ex. court documents)  *There is no need to complete estimated income form*
	Date of Change  Amount Received from Jan. 1, 2019 to present \$	
	Amount Expected to Receive from present to Dec. 31, 2019 \$	
	<b>3. ONE TIME INCOME RECEIVED</b> (for example – early distribution from IRA account).	<ul> <li>□ Documentation of one-time income</li> <li>□ Verification of use of funds. Payments toward consumer debt will not be considered.</li> </ul>
		*There is no need to complete estimated income form*
	4. PARENT'S SEPARATION/DIVORCE AFTER FAFSA FILED (parties living in the same household will not be considered)  Date of Separation/Divorce Which parent does student live with? (Select One)  Mother  Father	☐ Copy of separation agreement, divorce decree or substantial evidence (mortgage/lease/utility bills) proving parents live in separateresidences ☐ If taxes filed jointly a supplemental statement must be included showing how much income is attributable to each person.  *There is no need to complete estimated income form*
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	5. DEATH OF A PARENT OF PARENT/SE WAS FILED	POUSE AFTER FAFSA	☐ Copy of death certificate
	Date of Death		*There is no need to complete estimated income form*
	☐ Mother/Step ☐ Father/Step ☐ S	pouse	
	Was this person listed on the FAFSA?	□ Yes □ No	
	6. PARENT ENROLLED IN DEGREE SEEK DURING 2019-2020 ACADEMIC YEAR (		☐ Proof of registration (including number of credits)
	AT LEAST HALF TIME)		<ul> <li>Proof that a parent is enrolled in a degree seeking program</li> </ul>
			☐ Documentation of any cost reimbursement3
			*There is no need to complete estimated income form*
	7. OTHER EXTENUATING CIRCUMSTAN	ICE. For Example:	☐ Submit any relevant and supporting
	EDUCATIONAL LOAN PAYMENTS, DEP	•	Documentation
	ELDERLY CARE, FUNERAL EXPENSES, LI	EGAL EXPENSES,	
	HOME REPAIRS DUE TO DAMAGE		*There is no need to complete estimated income form*

#### II. Estimated 2019 Income – Required if your total income in 2019 will be lower than your 2017 income

- Complete both tables. Report only the income of <u>the impacted person</u> before exemptions, adjustments, and deductions. For example, if the father's income declined, only report estimated income for the father.
- Income all income/benefits that you or your parents/spouse expect to receive from 1/1/2019 to 12/31/2019
- Complete all items. If an item doesn't apply, you must enter "0"

Estimated Income for January 1, 2019 - December 31, 2019				
Courses of Toyoble Income	Dependent Students Father Independent Students Student		Mother Spouse	
Sources of Taxable Income				
Gross earnings from work (Wages, Salaries, Tips)		\$	\$	
Severance pay		\$	\$	
Gross unemployment compensation		\$	\$	
Business or farm income		\$	\$	
Interest, dividends and capital gains income		\$	\$	
Rental income		\$	\$	
Farm/ranch net income		\$	\$	
Taxable pension and/or annuity income		\$	\$	
IRA/Retirement account withdrawals		\$	\$	
Taxable Social Security benefits/disability		\$	\$	
Spousal maintenance/Alimony received		\$	\$	
Any other taxable income		\$	\$	
Total 2019 Estimated Taxed Income		\$	\$	



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	Dependent Students	Father	Mother
Sources of Untaxable Income	Independent Students	Student	Spouse
Child support received for all children in the household		\$	\$
Payments to tax-deferred pension and savings plans		\$	\$
IRA deductions & payments to SEP, SIMPLE, Keogh		\$	\$
Tax exempt interest income		\$	\$
Untaxed portions of IRA distributions or pensions		\$	\$
Any other untaxed income and benefits such as Workers Compensation, disability, etc.		\$	\$
Housing, food and other living expenses paid to you		\$	\$
Veterans non-education benefits, such as disability, death pension, or dependency and indemnity compensation		\$	\$
Other untaxed income		\$	\$
Total 2019 Estimated Untaxed Income		\$	\$

#### III. Asset Information

Please report **NET ANNUAL** amount **(total value minus total debt)** as of **today's date**. If an item does not apply to you and/or your spouse (if married) or your parent(s) (if dependent), please write "**N/A**" for amounts.

Example: If your summer home is currently valued at \$340,000 and \$45,000 is still owed on it, the NET value is \$295,000.

Note: DO NOT include value of life insurance and retirement plans (i.e. 401K, pension, annuities, etc.)

Type of Asset	Student/Spouse (if married) Amount: As of the date of this form	Parent(s)/Step-Parent (if dependent Amount: As of the date of this form
Cash, Savings, and Checking. Do not include financial aid.		
Coverdell and 529 College Savings Plans (if DEPENDENT list value under parent, if INDEPENDENT list value under student)		
Second Home/Summer Home/Rental Property (NOT your primary residence)		
Money market funds, mutual funds, & certificate of deposit		
Stocks, bonds, & other securities		
Business value/debt (include market value of land, buildings, machinery, equipment, inventories, etc. /Include mortgage and related liens or debt where the business was used as collateral.)  Do not include: the value of a small business that you and/or parents own and control that has 100 or fewer full-time or full-time equivalent employees.		
Investment Farm (DO NOT include a family farm if it is the principle place of residence AND you materially participate in its operation as claimed on Schedule F on the federal tax return.		



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Parent	Signature (if dependent, handwritten, not typed)	Date	 Parent Phone Number
Studen	t Signature (handwritten, not typed)	Date	_
	ation: I certify that the information on my 2019-2020 aplete to the best of my knowledge. We cannot accep		
•	Due to the complexity of Special Circumstance Appear package has been submitted.	als, please allow 3-4 weeks for pro	ocessing once a complete appeal
•	This request for re-evaluation neither guarantees an of late fees on past due student account balances. F family to address any current unpaid account balance	or more information on financing	goptions that may be available to your
•	Incomplete appeals will not be reviewed.		
•	The decision of the Financial Aid Director is <b>final</b> ; the	ere is no appeal process to the De	partment of Education.
In signin	g this form, I certify that I understand the following:		
	<b>ALL</b> supporting documents listed with the Reason for	r Appeal	
	Fully Completed and Signed Special Circumstances A	ppeal Form	
BE	FORE SUBMITTING, PLEASE CERTIFY T	HAT THE REQUIRED DO	CUMENTS ARE INCLUDED:
IV.	Certification		
Other titl	ed assets not listed above, commodities, precious & strateg	gic metals	
	or installment sale contracts (mortgages held on which you payment)	и	
business asset valu business	with fewer than 100 employees, then there is no need to in ue for the S Corporation. If the S Corporation is NOT for a fa as described above, then please provide the asset value of s or parent's (if the student is dependent) share of the S cor	oclude an amily the	
Schedule corporati	we assets on a Schedule E, please list their <b>total NET value a</b> E/K/K-1 of your 1040 (i.e. estates, royalties, partnerships, Sions, trusts).  ation — If the S Corporation has been formed for a family-over	5	