

Special Circumstances Appeal 2025-2026

Student's Name _____ Student ID Number _____

Email Address (parent or student) _____

Last 4 Digits of Student SSN (If ID Number Unknown) _____

Certification Statement

I certify that the information I am providing is true, complete, and correct to the best of my knowledge. Both parent and student agree to notify Financial Aid if the circumstance described below changes, if employment is obtained, or other sources of income are found. I understand that the decision of the appeals committee will be emailed to the email address provided above.

Student's Signature _____ Date _____

Parent's Signature _____ Date _____

Explanation of Special Circumstances

- Please attach a separate written statement detailing the specifics of your circumstances and providing any pertinent information that will help us better understand your particular situation.
- **You must submit a copy of 2024 IRS Tax Transcripts for all requests.**
- Please make sure to sign your written statement once completed.
- This form will be incomplete if this information is not submitted.

Special Circumstances for Consideration

(Check a response in each box)

Loss of Employment—You or your parent(s) income in 2024 will be less than earned in 2023: ☐ Yes ☐ No

Required Documentation

- Last pay stub showing year to date earnings
- Termination notice from employer
- Signed statement of severance pay or unemployment benefits

Non-Recurring Income—You or Your parent(s) received a one-time lump sum payment in 2023: ☐ Yes ☐ No

Required Documentation

- Documentation of one-time income including amount, type of income, and date of receipt
- Signed statement of how funds were spent, invested or rolled over

Loss of Taxable/Untaxed Income

—You or your parent received benefits in 2023 which have ceased or been reduced in 2024: ☐ Yes ☐ No

Required Documentation

- Documentation from agency stating total amount received in 2023, and termination date
- Documentation of 2024 updated amount

Separation or Divorce—You or your parents (if dependent) separated or divorced after filing the FAFSA: ☐ Yes ☐ No

Required Documentation

- 2023 and 2024 W-2 wage statements for each separated/divorced person
- Divorce decree or separation agreement OR proof of separate residences/addresses

Office Use Only • Intake and Processing – Please Initial and Date

Rec'd by: _____ Date: _____ Inputted in Colleague by: _____ Date: _____

Processed By: _____ Date: _____

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Projected Income and Benefits

January 1, 2025–December 31, 2025

	Parents	Student
Wages, Tips, Salary	\$	\$
Interest and/or Dividend Income	\$	\$
Business/Farm Income	\$	\$
Unemployment Compensation	\$	\$
Worker's Compensation	\$	\$
Pensions and/or Annuities	\$	\$
Severance Pay	\$	\$
Retirement Benefits	\$	\$
Disability Benefits	\$	\$
Social Security/SSI Benefits	\$	\$
Child Support	\$	\$
Alimony	\$	\$
Welfare Benefits	\$	\$
Other (Attach Description)	\$	\$
Total of All Income	\$	\$

The appeals committee will meet to consider your application and you will be advised of the committee's decision by email to the address provided on page 1 of this form.

Internal Use Only

Committee Review Date _____ Approved _____

Deny _____ Additional Information Request _____