



2021-2022 Dependent Application for Special Consideration

Your 2021-2022 FAFSA required 2019 household and income information. If your family's financial resources have **SIGNIFICANTLY** reduced since 2019, or if special circumstances warrant a review of your financial aid eligibility calculated on your 21-22 FAFSA, you may apply for Special Consideration.

The Financial Aid Office reviews each special consideration application on a case-by-case basis to determine if a recalculation of eligibility is warranted. We cannot guarantee an increase to any financial aid award, however we will strive to be fair, and timely. The review process should be completed within 4 weeks from the date of submission of **ALL** required forms and supporting documentation.

Student Name (Last Name, First Name, Middle Initial)	SS#/Student ID
Email address	Phone #

Your application **is not complete, AND WILL NOT BE REVIEWED, without strong documentation** that supports the extenuating circumstances you would like to have considered (see examples listed below).

The table below lists some of the typical circumstances that sometimes warrant special consideration. Please indicate (by a check mark in the first column) which, if any, of the circumstances fit the reason for your request. For any that you check, please fill in the date that the event took place, and place a check mark by item(s) of documentation you are including with your submission for us to consider **(AT LEAST ONE document must be provided that will strongly substantiate your claim)**.

	CHANGE OF EMPLOYMENT STATUS SINCE 2019 (Self and/or parents) Effective date(s): _____
<input type="checkbox"/>	Copy of final paystub(s) from previous employer(s) (self, and/or parent(s))
<input type="checkbox"/>	Most recent paystub(s) from new employer(s) (self, and/or parent(s))
<input type="checkbox"/>	Documentation of unemployment benefits, if applicable
<input type="checkbox"/>	Termination letter from previous employer, if applicable
<input type="checkbox"/>	Documentation of disability status, if applicable
	DEATH OF A PARENT in 2019, 2020, or 2021 Effective date: _____
<input type="checkbox"/>	Death certificate
	LOSS OF CHILD SUPPORT since 2019 Effective date: _____
<input type="checkbox"/>	Court orders pertaining to child support decrease
	OTHER EXTENUATING CIRCUMSTANCE CAUSING A REDUCTION IN AVAILABLE RESOURCES since 2019
	Briefly describe your circumstance, including the effective date of the event:
	(Contact the Financial Aid Office for guidance on gathering acceptable documentation)



STUDENT'S PERSONAL STATEMENT (Why did your family's resources lessen since 2019? When did the change occur? Do you expect any further changes—either increases or decreases—in 2021 or 2022?) If more space is needed, please write on the back of this sheet.

:

Your signature: _____ Date _____

**Complete the following table for both parent and student for each tax year.
Fill in zeros where a category does not apply.**

TAXABLE AND NON-TAXABLE INCOME AND BENEFITS

(DOCUMENTATION WITH AMOUNTS WILL BE REQUIRED FROM EACH SOURCE OF INCOME LISTED BELOW)

	2019		2020		Projected 2021 year end income	
	Parent	Student	Parent	Student	Parent	Student
Income from work	\$	\$	\$	\$	\$	\$
Social Security Benefits						
ADC or AFDC						
Child Support						
Unemployment						
Workers Compensation						
IRA/KEOG Payments						
Other Untaxed Income						
Other Taxable Income						
Total Income						



CHECKLIST (ALL ITEMS MUST BE SUBMITTED FOR YOUR APPLICATION TO BE CONSIDERED):

- _____ Completed Special Consideration form including your signed personal statement on page 2.
- _____ Completed Student Verification and Data Form.
- _____ Strong documentation supporting your situation (see the items listed in the chart on page 1 for APPLICABLE supporting documents).
- _____ If not linked by the IRS to your FAFSA, include a copy of yours and/or your parent's **2019 tax return** (if filed) with an original signature, and 2019 W-2 forms. **(If 2019 taxes were linked successfully, disregard this item and write LINKED in the space)**
- _____ A copy of yours and/or your parent's **2020** tax return, with original signatures and **2020 W-2** forms.
- _____ Other documentation per the Financial Aid Representative's request, if applicable.

_____ ***"I understand that failure to submit the above documentation will result in an automatic denial of my appeal. If I have questions, I will contact a Financial Aid Representative to help me supply adequate documentation."***

_____ I certify that all information contained in this appeal, including my personal statement and other documentation, is true and complete to the best of my knowledge. I affirm that I have not knowingly or intentionally provided false statements or fraudulent documentation. **I understand that if I provide false or fraudulent statements and/or documentation, I risk an automatic denial of my appeal and my federal financial aid eligibility could be jeopardized.**

Student Signature _____
Date

Parent Signature _____
Date

Financial Aid Office Use Only Approved Denied

Financial Aid Director _____
Date