



2021-2022 Independent 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 (**Enough documentation must be provided to strongly support your claim**).

| | |
|--|---|
| | CHANGE OF EMPLOYMENT STATUS SINCE 2019 (Self and/or spouse) Effective date(s): _____ |
| | <input type="checkbox"/> Copy of last paystub(s) from previous employer(s) (self, and/or spouse) <input type="checkbox"/> Most recent paystub(s) from current employer(s) (self, and/or spouse) <input type="checkbox"/> Documentation of unemployment benefits, if applicable <input type="checkbox"/> Employment status letter from any current or prior employers on company letter head, substantiating pertinent details (examples: hire date, termination date, hourly wage, average hours per week, etc.) <input type="checkbox"/> Documentation of disability status, if applicable |
| | DEATH OF SPOUSE following submission of your FAFSA Effective date: _____ |
| | <input type="checkbox"/> Death certificate |
| | DIVORCE OR CHANGE OF CHILD SUPPORT since 2019 Effective date: _____ |
| | <input type="checkbox"/> Court orders pertaining to divorce or to decrease in child support |
| | 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 household resources lessen since 2019? When did the change occur? Do you expect any further changes—either increases or decreases—in 2021?) *If more space is needed, please write on the back of this sheet.*

Your signature: _____ **Date** _____

COMPLETE the following table.

Both student and spouse income MUST be listed for each tax year, even if \$0.

Fill in zeros (\$0.00) if 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 | |
|--------------------------|---------|--------|---------|--------|--------------------------------|--------|
| | Student | Spouse | Student | Spouse | Student | Spouse |
| 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 21-22 FAFSA, include a copy of your **2019 tax return** (if filed) with an original signature, and 2019 W-2 forms for yourself AND your spouse (if married). **(If 2019 taxes were linked successfully to your 21-22 FAFSA, disregard this item and write LINKED in the space)**
- _____ A copy of your **2020** tax return, with original signatures and **2020 W-2** forms (self and spouse if applicable).
- _____ If you wish for your 2021 expected income to be considered, please provide pay stubs and statements (your own and current or former employer's) documenting how you calculated your projected 2021 income.
- _____ 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

Financial Aid Office Use Only

Approved Denied

Financial Aid Director _____
Date