

2024-25 FAC SPC Special Circumstances Appeal for Financial Aid

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Student First Name										Student ID						ח	Date of Birth (mmddyy)								

If you have extenuating circumstances that affect your ability to contribute to your educational costs, you may request a review of your financial resources.

Appeals will not be considered without the completed appeal form, your written statement explaining your Special Circumstance, and <u>ALL</u> supporting documentation. If any part of this process is incomplete or documentation is insufficient, the appeal will be denied.

Verification of the 2024-25 FAFSA must be completed before any Special Circumstance review will be considered. Additional documentation may be requested by the University.

STUDENT INSTRUCTIONS:

- Complete, sign and date this form in black or blue ink.
- Include printed name and student ID or last four digits of the student's social security number on all documents.
- Check the applicable box below:
 - ☐ I am an Independent Student: Supporting documentation requested below is for you (and your spouse, if married).
 - ☐ I am a Dependent Student: Supporting documentation to be provided below is for your parent (and self, if applicable)

Check the box(es) below to indicate the reason(s) for your appeal and attach the listed documentation:

☐ Marital Status Change

- Please provide details about your Special Circumstance in the Special Circumstance Statement section as the end of this form.
- Copy of the Divorce Decree or Separation Agreement, Marriage License, or legal document from attorney or court.
- Copy of 2022 and 2023 W-2(s), include spouse where applicable.
- Copy of 2022 IRS Tax Transcript(s), if not provided with Verification. Transcripts can be requested at www.irs.gov/transcript.
- Signed copy of 2023 Federal Tax Return (We will not need Tax software worksheets, State Tax Returns or Local Tax Returns)

☐ Loss of Earned Income.

- Please explain your employment changes in the Special Circumstance Statement section at the end of this form. Include your employer name, dates unemployed, current job search status, and household income resources.
- Copy of a Termination/Separation letter or email from your former employer stating your dates of employment (OR) a copy of your Unemployment Determination of Benefits document showing eligibility date, weekly benefit amount, and date eligibility ends.
- Copy of 2024 final pay stub (if loss of Earned Income occurred in 2024) with year-to-date earnings and showing all paid-out benefits (i.e. vacation, sick time).
- Copy of 2022 and 2023 W-2(s), include spouse where applicable.
- Copy of 2022 IRS Tax Transcript(s), if not provided with Verification. Transcripts can be requested at www.irs.gov/transcript.
- <u>Signed</u> copy of 2023 Federal Tax Return (We will not need Tax software worksheets, State Tax Returns or Local Tax Returns)
- Copy of Severance pay document (if applicable).

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- Decrease of Earned Income If you changed employers and your income is less or you are working for the same employer and your rate of pay has decreased, please provide the document listed below:
 - Please explain your employment changes in the Special Circumstance Statement section at the end of this form. Include your employer name, date employer and/or income changed.
 - <u>Signed</u> and <u>dated</u> letter or email from your previous employer (on company letterhead/email) stating your dates of employment or date change in income occurred with current and previous rate of pay.
 - Copy of 2024 final pay stub (if applicable) with year-to-date earnings including all paid out benefits (i.e. vacation, sick time).
 - Signed and dated letter from new employer (on company letterhead) stating the date you began employment.
 - Copy of most recent pay stub to reflect your new rate of pay and a copy of final paystub reflecting prior pay with year-to-date earnings if applicable.
 - Copy of 2022 and 2023 W-2(s), include spouse where applicable.
 - Copy of 2022 IRS Tax Transcript(s), if not provided with Verification. Transcripts can be requested at www.irs.gov/transcript.
 - Signed copy of 2023 Federal Tax Return (We will not need Tax software worksheets, State Tax Returns or Local Tax Returns)

☐ Loss/Reduction of Child Support Benefit

- Statement from Child Support Enforcement Agency showing payments for the 2022, 2023, and 2024 years with the obligor/obligee names (OR) a copy of end of year pay stub showing total amount withheld from pay for child support.
- Copy of Divorce Decree with Child Support Agreement if child/children names are not included on the statement from the Child Support Enforcement Agency or if multiple dependent children are included in the household.
- Please include the information below in the Special Circumstance Statement section at the end of this form, including the name(s) of the child/children who they will cease receiving benefits for and if they will continue to receive benefits for other dependent children. You must also include the date child support benefits end.

One-Time-Only Distribution

- Please explain in your statement the amount of your one-time-only distribution, how the funds were used and if any funds are remaining.
- Copy of 2022 tax document(s) reflecting distribution (i.e. W-2G, 1099-R, 1099-B, and 1099-C).
- Copy of 2022 IRS Tax Return Transcript(s), if not provided with Verification. Transcripts can be requested at www.irs.gov/transcript.
- Please include the information below in the Special Circumstance Statement section at the end of this form.
- ☐ <u>Unusual Medical Expenses (not applicable for graduate students)</u> Only expenses <u>incurred</u> and <u>paid</u> in 2022 will be considered.
 - Please provide details about your Special Circumstance in the Special Circumstance Statement section at the end of this form.
 - Itemized account statements showing patient name, date of service, charges, and student payment, OR;
 - Copy of Tax Schedule A from your 2022 IRS 1040 Federal Tax Return (if medical expenses were reported).

Loss or Reduction of Income Due to Disability or Retirement

- Please explain your disability or retirement change in the Special Circumstance Statement at the end of this form.
- Copy of disability or retirement benefit statement(s) showing date disability or retirement began and the monthly benefit amount.
- Copy of 2024 final pay stub(s) (if reduction in income occurred in 2024) with year-to-date earnings (if employed all/partial vear).
- Copy of 2022 & 2023 W-2(s) include spouse where applicable.
- Copy of 2022 IRS Tax Transcript(s), if not provided with Verification. Transcripts can be requested at www.irs.gov/transcript.
- Signed copy of 2023 Federal Tax Return (We will not need Tax software worksheets, State Tax Returns or Local Tax Returns)
- Include information in your statement about your special circumstance.

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Other Circumstances	
Please explain your Other Circumstance in the box provided l	pelow.
Special Circumstance Statement	
Please provide an explanation of your Special Circumstance. It's impocircumstances occurred, specific details regarding the Special Circumstanderstand your change in circumstances.	
APPEAL PROCESS:	
If your appeal is approved, you will be notified by mail or email and Department of Education with the special circumstance's information.	•
2. If your appeal is not approved, you will be notified by mail or email the FAFSA.	and your aid will be based on the information provided on
ertification and Signatures: I certify that all information and document nowledge. If asked, I agree to provide additional proof of the informatio niversity to verify any third-party documentation which I have submitte	n/documentation provided with this form. I authorize the
Student Signature:	Date:
Student Signature: Parent Signature:	Date:
Return this form, your letter, and supporting documentation within 2	

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