Na	ame		
			2024-2025
			Special Circumstances Income Reduction
Ple ex	ease answ planation	er the	d that your family has recently had a change in income and you are requesting special circumstances consideration. e following questions as they apply to you, and/or your spouse, and/or your parents. You must provide a detailed apport the item(s) you check on item #2 below. Forms submitted without a written explanation and proper vill not be reviewed until completed. This decision made by the Financial Aid Office will be final.
1.	Was you	ır inco Yes	ome and/or your spouse's or parents' income less in 2023 than in 2022 for any of the reasons listed in item #2 below?
2.	Please o	heck	the appropriate reason and explain, giving the date of the change in your situation.
		a.	One-time income (examples: inheritance, moving expense allowance, back year Social Security payments, or IRA or pension distribution). Send verification of source, amount and provide detailed explanation of how funds were spent.
		b.	Non-taxable income or benefits Identify non-taxable income or benefits. Note: This is untaxed income or benefits you received in 2022, but completely lost in 2023. The untaxed income or benefit must be from a public or private agency, from a company, or from a person because of a court order. Send verification of source and amount. Also, write a detailed statement explaining type of benefit, amount received in 2022, and date benefit was terminated and why.
		C.	Unemployment or change in employment Note: If the loss of income was due to a plant closing or lay-off, and you or your spouse or your parent is considered a dislocated worker, attach a letter from the Employment Security Commission verifying the status. If you are a dependent student, give information about both parents unless they are separated or divorced—then give information about the parent you live with. If you are married, give information about you and your spouse. Be very detailed and specific. Please attach copies of the 2023 tax return transcript for you and spouse or parent if applicable.
		d.	Divorce/separation Note: If you or your parent are divorced or separated, give only your information or the information of the custodial parent. Attach a Divorce-Separation Form with appropriate signatures.
		e.	Death of spouse or parent Note: If the loss of income was due to the death of your spouse or parent, give only your information or the information of your surviving parent. Attach a copy of the death certificate.
		f.	Disability of student, spouse, or parent Attach detailed explanation of who is disabled, date the person became disabled and information on loss of income, if applicable.
		g.	Other reason(s) for loss of income. Attach a detailed explanation of your circumstance and the date that it occurred.

Signature

Parent Signature (If Dependent Student)

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.



Date

Date

(You must print off this form and sign it. We cannot take electronic signatures.)

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