

COMPLETE BOTH PAGES OF THIS FORM

This form is used in cases where there have been **involuntary changes** in income or employment, unusual dental/medical expenses paid, divorce/separation, or other **unplanned** circumstances which have changed the total annual income and financial resources of an INDEPENDENT student, or of the Contributor(s) OF A DEPENDENT STUDENT since 2022. Changes in the income of a dependent student will not be considered.

You MAY be eligible for additional financial assistance if these circumstances apply. Please complete and review the entire application before submitting. Your Special Circumstance Form must be submitted with **ALL** supporting documentation, as described within this form. **An incomplete request will be denied.** An approved Special Circumstance does NOT guarantee you will receive additional financial aid.

Last Name	First Name	Middle Initial	SVSU Student ID or Student Social Security Number
Street Address	City	State	Phone Number

Check the boxes for all circumstances you are asking to be reviewed.

		Supporting Documentation:
<input type="checkbox"/>	Loss of Employment Further documentation may be requested to assist in estimating 2024 income. This may delay processing.	<input type="checkbox"/> 2022 and 2023 SIGNED Federal Tax Return* and W-2s <input type="checkbox"/> Third party documentation, including last date of employment <input type="checkbox"/> Copy of last pay stub AND current pay stub if now employed <input type="checkbox"/> Documentation of any unemployment benefits, pandemic pay, or any severance payout <input type="checkbox"/> Written explanation about why the change in income happened
<input type="checkbox"/>	Significant decrease in wage or salary Further documentation may be requested to assist in estimating 2024 income. This may delay processing. PLEASE NOTE: If you own your own business or farm, or are employed on commission, your 2024 tax return may be required.	<input type="checkbox"/> 2022 and 2023 SIGNED Federal Tax Return* and W-2s <input type="checkbox"/> Copy of last paystub(s) received in 2024 from each place of employment <input type="checkbox"/> Written explanation about why the change in income happened and how long it is expected to continue
<input type="checkbox"/>	Divorce or Separation	<input type="checkbox"/> 2022 and 2023 SIGNED Federal Tax Return* and W-2 forms <input type="checkbox"/> Copy of divorce or two proofs of separate households (copy of rental agreement, utility bills, copy of driver's license showing separate addresses) <input type="checkbox"/> Documentation of support (one time or monthly) payment to custodial parent <input type="checkbox"/> Written explanation of living situation
<input type="checkbox"/>	Death of parent (or spouse)	<input type="checkbox"/> 2022 SIGNED Federal Tax Return* and W-2s <input type="checkbox"/> Death certificate <input type="checkbox"/> Copy of last pay stub from deceased person's employment
<input type="checkbox"/>	Excessive un-reimbursed medical/dental expenses paid in 2022. Paid medical expenses must be in excess of 7.5% of 2022 AGI	<input type="checkbox"/> 2022 SIGNED Federal Tax Return* and W-2s <input type="checkbox"/> Must include: IRS Form 1040 Schedule A (Itemized Deductions). <input type="checkbox"/> Copy of PAID receipts for un-reimbursed medical/dental expenses
<input type="checkbox"/>	Other reason for special circumstance	<input type="checkbox"/> 2022 and 2023 SIGNED Federal Tax Return* and W-2 forms <input type="checkbox"/> Written explanation detailing situation-with supporting documentation

* If a copy of the tax return is not available, request an "IRS Tax Return Transcript - Online Request. Go to www.irs.gov, click "Get your Tax Record". Make sure to request the IRS Record of Account Transcript" and NOT the "IRS Tax Account Transcript" .

Complete the form below regarding Contributor(s) of dependent student or INDEPENDENT student ONLY.

In this section, please detail your total annual income for 2022 and 2023, and your projected income for 2024.

If married, please list each income separately. Do not leave the worksheet blank, if the question does not apply answer N/A or \$0.

2022		2023		2024 - Projected	
Source	Annual Amount	Source	Annual Amount	Source	Annual PROJECTED Amount
Earnings from work Contributor 1/Student Contributor 2/Spouse		Earnings from work Contributor 1/Student Contributor 2/Spouse		Earnings from work (submit current paystub) Contributor 1/Student Contributor 2/Spouse	
Unemployment Benefits Contributor1/Student Contributor2/Spouse		Unemployment Benefits Contributor1/Student Contributor2/Spouse		Unemployment Benefits Contributor1/Student Contributor2/Spouse	
Severance pay Contributor 1/Student Contributor 2/Spouse		Severance pay Contributor 1/Student Contributor 2/Spouse		Severance pay Contributor 1/Student Contributor 2/Spouse	
Alimony/Spousal Support: ANY expenses that non-custodial parent paid		Alimony/Spousal Support: ANY expenses that non-custodial parent paid		Alimony/Spousal Support: ANY expenses that non-custodial parent paid	
Child support received for all children		Child support received for all children		Child support received for all children	
Business Income Contributor 1/Student Contributor 2/Spouse		Business Income Contributor 1/Student Contributor 2/Spouse		Business Income Contributor 1/Student Contributor 2/Spouse	
Pension/IRA Contributor 1/Student Contributor 2/Spouse		Pension/IRA Contributor 1/Student Contributor 2/Spouse		Pension/IRA Contributor 1/Student Contributor 2/Spouse	
Social Security		Social Security		Social Security	
Other		Other		Other	

By signing this document:

I certify that all the information provided on this form is complete and correct to the best of my knowledge.

I understand that I may be asked to submit additional documentation if necessary.

I realize that if I do not fully document my special circumstance, this form may be denied.

I understand that approval of submitted unusual circumstances may not always result in additional funding.

Student Signature

Date

Contributor Signature (for dependent students only)

Date