

Special Circumstances Form

Submit this form if your family's financial situation has changed significantly since filing the FAFSA.

Student Information

Name

Student ID

Email *

Phone

Reason for Request

Loss of employment

Reduction in income

Divorce or separation

Death of parent or spouse

Unusually high medical expenses

One-time income on tax return

Other (explain below)

Explanation

Describe your special circumstances in detail *

Income Changes

Previous Annual Income

Current/Expected Annual Income

Required Documentation

Tax returns/transcripts

Termination letter or unemployment documentation

Divorce decree or separation agreement

Death certificate

Medical bills/documentation

Student Signature

Sign above

Date: _____

Date

(MM/DD/YYYY)