

2022-2023 Special Circumstance Petition- Student

Student's Name: _____ ID: M _____

IMPORTANT:

- This form, along with any attachments, must be turned in to OFA no later than June 30, 2023.
 - If you turn in this form after January 31, 2023, you must also attach your 2022 Tax Return Transcript.
 - Non-filers must attach their 2022 wage and Income Transcript. Tax documents can be requested from IRS.gov.
 - If a grade level change occurs within an aid year, aid for terms at the previous grade level will not be updated.
 - The grade level used for this process is determined by term in which this request is fully processed, not initialized.
 - This review request will only affect the 2022-2023 FAFSA.
 - Due to yearly changes in FAFSA calculations, the results of previous or later review requests may not be identical.
 - Only copies of documents should be submitted. Keep any originals for your own records, as they cannot be returned.
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Part 1: Reason for Change in Circumstances and Initial Documentation Needed

A.) ___ Reduction In Income/Unemployment

At any point in the 2021 or 2022 calendar years, did you or your spouse have a reduction in income of at least 25%, become unemployed for at least 10 weeks, or lose a one-time benefit?

- Typewritten statement specifically explaining the change and any pertinent details of the situation.
- Letter from former employer(s) (or DD214 if military)
 - Letter must be on letterhead and indicate last date of employment and YTD gross earnings.
- Most Recent Paystub(s) (or leave & Earnings statement if military)
- Unemployment Benefits Statement
 - If reduction in income was due to unemployment
- For loss of one-time benefit
 - 2020 tax return transcript
 - 2021 tax return transcript

B.) ___ Separation/Divorce/Death of Spouse

At any point between when you filed the FAFSA and June 30, 2023, did you and your spouse become separated, divorced, or did your spouse become deceased?

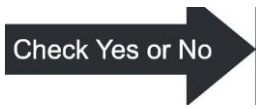
- Typewritten statement specifically explaining the change and any pertinent details of the situation.
- Divorce Decree/Separation Paperwork OR Death Certificate/Obituary Publication/Funeral Program
- Wage & Income Transcript
- Tax Return Transcript

C.) ___ Medical/Dental Expenses

During the 12-month income period reflected on your FAFSA, your spouse/dependents (but not you) have medical or dental expenses for any members of the household which were not covered/reimbursed by insurance?

- Typewritten statement specifically explaining the change and any pertinent details of the situation.
- Which family member(s) were affected?
- What were the expenses in relation to?
- What year did expenses occur?
- Tax Return transcript for year in which medical/dental expenses occurred
- Medical Addendum (see Addendum for additional documentation requirements)

Part 2: Financial and Household Information



Do your 2021 taxes reflect your current financial situation?
 Yes (Provide 2021 tax return transcripts & complete "Total 2021 Income" column)
 No (Complete "Projected Total 2022 Income" column)

IMPORTANT: Do not leave any part of this section blank. Use "O" or "N/A" if an item does not apply.

Taxed Income:	TOTAL 2021 INCOME	PROJECTED 2022 INCOME
Income Earned From Work - Student	\$ _____	\$ _____
Income Earned From Work - Spouse	\$ _____	\$ _____
Unemployment Compensation	\$ _____	\$ _____
Other Source: _____	\$ _____	\$ _____
Other Source: _____	\$ _____	\$ _____

Untaxed Income:		
Payments to Tax-Deferred Retirement Plan/Pensions	\$ _____	\$ _____
Tax deductible payments to IRA/KEOUGH	\$ _____	\$ _____
Child Support Received (12 Months)	\$ _____	\$ _____
Tax-Exempt Interest Income	\$ _____	\$ _____
Untaxed IRA Distributions	\$ _____	\$ _____
Untaxed Pensions	\$ _____	\$ _____
Military & Clergy Living Allowance {Do not include BAH}	\$ _____	\$ _____
VA Non-Education Benefits/VA Work Study	\$ _____	\$ _____
Workers' Compensation	\$ _____	\$ _____
Disability Benefits (non-social security)	\$ _____	\$ _____
Money Received/Paid On Your Behalf	\$ _____	\$ _____

Household Size Information (Between July 1, 2022 - June 30, 2023):

Number of Household Members _____
 Number of Household Members in College: _____

Asset Information (As of Today):

Total Cash, Savings, and Checking Accounts:	\$ _____	\$ _____
Net Worth of Real Estate/Investments:	\$ _____	\$ _____
Net Worth of Business/Farm:	\$ _____	\$ _____

Part 3: Student & Spouse Certification:

- I affirm that:
- All the information provided in this request is true and accurate to the best of my knowledge.
 - The penalty for giving false information may include repaying any funds received.
 - Turning in this form does not guarantee the request will be approved.
 - Any decision based on this request cannot be appealed to the Department of Education.
 - Signatures must be either a wet signature (in ink) or via DocuSign.

Student (required): _____
Print Name
Signature
Date

Spouse (required): _____
Print Name
Signature
Date