# \*CSN

## **OFFICE OF FINANCIAL AID**

## 2022-2023 Request for Special Circumstance

2023 CFSPEC

Student Nan	ne: NSHE ID:
a recalculatio	or students and/or their families experiencing a significant change in their financial circumstances to appeal for on of their financial aid eligibility based on the current conditions. Students selected for verification must everification process before a Special Circumstance is processed. Please be advised that all Professional
•	ppeal decisions are final.
Section 1: IN	STRUCTIONS – Incomplete appeals are subject to denial
	plete and submit this Special Circumstances Request form to the Office of Financial Aid.
2. Subr	nit a signed statement explaining your situation related to the circumstances below. Please include any relevant dates our statement.
3. Subr	mit all required documentation based on the circumstance that best fits your situation
Section 2: CI	RCUMSTANCES - Select the circumstance that applies to your situation and attach the required paperwork.
	STUDENTS: for the items listed below, submit the documentation for you and your parent(s) NT STUDENTS: for the items listed below, submit the documentation for you and your spouse (if married)
exter 1. 2. 3. 4.	of substantial taxable income since the 2020 tax year because of loss or change in employment due to nuating circumstances for a period of 10 weeks or longer during the 2022 year.  Signed copy of you and your spouse's (if married) OR you and your parent's 2021 tax return  Letter or documentation from all previous employer(s) in 2022 indicating dates of employment  Most recent pay stub(s) indicating year-to-date earnings from all jobs in 2022  If receiving unemployment benefits, the most recent unemployment compensation statement. If you're not receiving unemployment, please address it in your personal statement and provide a copy of the denial notice
1.	of substantial untaxable income (e.g., child support, disability benefits, and worker's compensation) Copy of Notification of benefits reduction/termination, including the effective date Documentation of 2022 income (taxable and non-taxable)
1.	sive non-reimbursed medical and/or dental expenses not covered by insurance Documentation of non-reimbursed medical and/or dental expenses (i.e., receipts for medical services) <u>OR</u> Copy of <u>Schedule A</u> Form from 2020 Federal Tax Return
1. 2. 3. 4.	ration, Divorce, or Death of a spouse which occurred <u>AFTER applying for financial aid</u> Copy of court order, final divorce decree, or legal separation agreement If not legally separated, a signed statement of separation and proof of separate households (i.e., copy of lease agreements, utility bills showing address) <u>Signed</u> copy of 2020 taxes and all W-2/1099's from both persons Copy of death certificate, if applicable Complete Section 3, Household Size section (page 2)
1. 2. 3.	bution of 401K or similar due to financial hardship included in the 2020 adjusted gross income.  2020 IRS Tax Return Transcript or <u>signed</u> copy of 2020 Tax Return <u>and</u> 2020 W-2 forms for all jobs held and 2020 1099R form  A signed statement detailing the situation and how funds were utilized. Indicate if any funds are remaining.  Copy of mortgage or rent documents showing the monthly amount, if funds used to assist in payments
1. 2.	time income received in 2020 that was included in the 2020 adjusted gross income.  2020 IRS Tax Return Transcript or <u>signed</u> copy of 2020 Tax Return <u>and</u> 2020 W-2 forms for all jobs held in 2020 and 2020 1099R form  A signed statement explaining the type and amount of one-time income received in 2020 and not in 2021 and 2022

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Section 3: HOUSEHOLD SIZE — Complete only if you or your parent became divorced, separated, or widowed after completing the FAFSA

FOR DEPENDENT STUDENTS: List all current household members, including yourself, your parent, and your parent's dependents, that your parent provides more than half of their financial support from now until 7/1/2023.

FOR INDEPENDENT STUDENTS: List all current household members, including yourself, your spouse (if married), and your dependents that you or your spouse provide more than half of their financial support from now until 7/1/2023.

Name	Birth Date	Relationship to student	College attending during 2022-2023
John Smith (example)	12/31/1999	Self	Central College
		Self	
ection 4: CERTIFICATION			
gree to provide more detailed doc	umentation if required.	/ We understand that	o the best of my/our knowledge. I/we failure to provide the required sleading information may result in