## Special Circumstances Appeal for DEPENDENT Student Instructions

Special Circumstance appeals are reviewed case by case for Fall 2016 semester: July 31, 2016 through October 31, 2016 and Spring 2017 semester: January 1, 2017 through March 31, 2017.

Special Circumstance appeals are also reviewed case by case for Fall 2017 semester: July 1, 2017 through October 31, 2017 and for Spring 2017 semester: January 1, 2018 through March 31, 2018.

**Important Note:** The instructions below apply to each parent included in the household. Notify the financial aid office if the parents filled separate IRS income tax returns for 2015 or had a change in marital status after December 31, 2015.

You may complete the Special Circumstances Appeal form if you are a dependent student whose parent’s current financial situation is not accurately reflected by their 2015 or 2016 tax information. Your family’s 2015 or 2016 income is used to assess your financial need for the 2017-2018 school year, in accordance with federal laws and regulations. If your family’s income is lower due to special circumstances, a financial aid administrator may be able to use estimated year 2017 income to calculate financial need. This financial situation may be due to loss or reduction of employment, separation, divorce, or death of a parent, loss of income, unusual out of pocket medical expenses, or other circumstances. **Your appeal is complete only when you submit documentation that supports your circumstance to the Financial Aid Office.** Your appeal will not be considered until all necessary documents have been submitted.

**YOU MUST ALSO SUBMIT A PERSONAL STATEMENT DESCRIBING THE CIRCUMSTANCE.**

Select one category from the following list that most closely describes your special circumstance. Read the description carefully and attach all of the documentation requested under that category.

- **Loss or reduction of employment**
  
  Your parent earned money in 2015 or 2016 and has had a reduction in hours (loss of overtime compensation will **not** be considered), or has lost employment for at least 10 weeks in 2016 or 2017 that has resulted in a reduction of wages. **Ten (10) weeks must have passed prior to submission of this appeal for either circumstance.**

  **APPEALS SUBMITTED BEFORE TEN (10) WEEKS WILL NOT BE PROCESSED.**

  You must provide copies of all the following:
  
  - written verification from the former employer(s) indicating start and end dates of employment or reduction of hours, the amount of your parents’ year-to-date gross earnings, severance pay, vacation, or retirement payout
  - a written statement from your parent’s current or future employer(s) that indicates his/her expected gross earnings for the calendar year 2016 or 2017.
  - Include copies of your parent’s two most recent pay stubs
  - eligibility forms that indicate dates and amount of unemployment benefits

- **Separation, divorce, or death**
  
  You have already filed your annual Free Application for Federal Student Aid (FAFSA) and since that time, your parents have become separated, divorced or a parent has died.

  You must provide copies of all of the following that apply to your circumstances:
  
  - legal separation papers or divorce decree
  - death certificate

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Loss of taxed/untaxed income or benefit

Your parent(s) received unemployment compensation, or other taxed or untaxed income or benefit in 2015 or 2016, and have completely lost that income or benefit for at least 10 weeks in the calendar year 2015 or 2016. Ten (10) weeks without compensation must have passed prior to your submission of this appeal. **APPEALS SUBMITTED BEFORE 10 WEEKS WILL NOT BE ACCEPTED.** The untaxed income or benefit must be from a public or private agency, a company, or from a person due to court order. (Do not include loss of veteran benefits). Income and benefits include: Social Security Benefits, Supplemental Security Income (SSI), child support, untaxed retirement or disability benefits, welfare benefits, etc.

You must provide copies of all of the following:

- contracts, agency notices, or legal papers that indicate the date your parent’s taxed/untaxed income or benefit was terminated
- what amount of income came from that source
- how that income was used

Loss of one-time income

Your parent(s) received a one-time income in 2015 or 2016 that will not occur in 2016 or 2017 (e.g. rollover into a Roth IRA, moving moving expense allowance, back-year Social Security payments, or a divorce settlement). Special circumstances consideration will not be given if this one-time income is a result of an inheritance, job bonus or overtime compensation, gambling winnings, pension, capital gain, insurance settlements, or early distributions of retirement accounts.

You must provide copies of the following:

- contracts, agency notices, or legal papers that indicate the date your parent’s income was terminated
- what amount of income came from that source
- how that income was used

Unusual, unreimbursed out of pocket medical care expense

**NOTE:** Only expenses already paid directly by your parents will be considered. Unexpected/non-recurring out of pocket medical expenses—Your parent(s) have paid for unusual or unexpected nonrecurring medical expenses for a member of your household that are not reimbursed. Only those costs not covered by insurance or another agency may be considered. The payment of insurance premiums, regular health maintenance, and routine expenses such as eyeglasses, birth control prescriptions, and elective or cosmetic procedures (e.g., orthodontic braces) are not considered unusual medical expenses and will not be considered for the Special Circumstances appeal.

You must provide copies of the following:

- statement from a health care provider that documents the unusual condition
- receipts that demonstrate payment of medical treatment for this condition

Tuition expenses for private elementary or secondary education

Your parent(s) pay elementary or secondary school tuition for a member of your family during the 2016-2017 or 2017-2018 academic year at a PRIVATE elementary or secondary school.

You must provide copies of all of the following:

- school’s enrollment contract that includes name(s) of the child(ren) enrolled during the academic year 2016–2017 or 2017-2018
- tuition cost, and the amount of any scholarships that subsidize tuition
**Special Circumstances Appeal**

**DEPENDENT STUDENTS**

Read the Special Circumstances Appeal Instructions carefully before completing this form. Attach your personal statement and all required documentation. You must complete Sections 1, 2, & 3. The appeal will be for one year only!!! **Choose year 2016 or year 2017, not both.**

### SECTION 1: Background

<table>
<thead>
<tr>
<th>Student name (first, middle initial, last)</th>
<th>W#</th>
<th>Date</th>
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| Address (Street or P.O. Box, City, State, Zip-code) |


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<tr>
<th>2016 Total Income</th>
<th>2017 Year to date Income</th>
<th>Rest of 2017 year Income</th>
<th>2017 Total Income</th>
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</thead>
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1. Income earned from work by parent 1 (Example: wages, salary, and tips)
2. Income earned from work by parent 2 (Example: wages, salary, and tips)
3. Business, farm, or rental income
4. Unemployment compensation
5. Spousal maintenance
6. Child support
7. Welfare benefits (such as AFDC or TANF)
8. Veterans benefits
9. Social Security benefits (including SSI)
10. Workman’s compensation
11. Short-term or long-term disability benefits
12. Severance pay
13. Withdrawal from retirement account
14. Other income (pension, annuity, rental income, housing allowance, bonuses)

**2016 or 2017 Totals**

### SECTION 3: Certification

To the best of my knowledge, the information in this appeal is true. I understand that the misrepresentation of facts in connection with this appeal, whenever discovered, may be sufficient cause, in and of itself, for cancellation and repayment of financial aid. **Warning: If you use this form to establish eligibility for federal student financial aid and purposely give false or misleading information, you may be fined $20,000, sent to prison, or both.**

<table>
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<th>Student signature:</th>
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<tr>
<td>Parent signature:</td>
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To be completed by WSU Financial Aid Office

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<th>ACTION:</th>
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