

Student Name _____

Banner ID No. _____

APPEAL FOR SPECIAL CIRCUMSTANCES

(For Calendar Year _____)

If the Free Application for Federal Student Aid (FAFSA) or the Student Aid Report (SAR) does not reflect your current financial situation and your income has changed due to a special circumstance (i.e. divorce, loss of employment, etc.) we will consider your special circumstance(s) if you complete this form and submit the necessary documentation.

The following special circumstance(s) applies to:

- _____ Myself
_____ My Spouse
_____ My Parent(s)

1. **Attach a statement explaining your special circumstance in detail.** Please provide your **total** projected income for the above-listed calendar year and submit documentation (i.e. last paystub, unemployment benefit statement) to support your projected income.

___ Employment earnings (amount per month X #months received or until December 31)	= \$ _____
___ Unemployment income (amount per month X #months received or until December 31)	= \$ _____
___ Worker's Compensation (amount per month X #months received or until December 31)	= \$ _____
___ Welfare/AFDC benefits (amount per month X #months received or until December 31)	= \$ _____
___ Support from family or friends (amount per month X #months received or until December 31)	= \$ _____
___ Other _____	= \$ _____
Total resources for calendar year above	= \$ _____

2. Attach a statement from a social worker, counselor, doctor, etc., to document your special circumstance. If you were terminated or discharged from the military, a letter from your past employer or military discharged papers indicating your last day of work will be needed. Additional documentation may be requested.

I certify that the information above is true and correct to the best of my knowledge. I understand that any false statement or misrepresentation may be cause for denial, reduction, or repayment of financial aid.

Student's Signature Date

Spouse's Signature Date

Parent Signature (if dependent) Date