

## **2026-2027 Special Circumstances Request**

Student Name:		ID#:			
Guidel	lines:				
aid for the eligibility only con circumst his mak	ne 2026-2027 academic year. However, there are special c y for federal financial aid using Student, Spouse and Paren isider reductions in income for the circumstances listed ances if you already have an SAI (student aid index) of zero	nt 2024 income is used to determine student eligibility for financial ircumstances under which we may be able to recalculate student at 2025 income or adjusted 2026 income. <b>The Financial Aid Office will in Step 2 of this form</b> . It is our policy <b>not to</b> consider special or less, or if your loss of income is less than 25% of you AGI unless, natural disaster, personal living (e.g. wedding expenses, credit card er items) are also not considered.			
Step 1	: Request explanation in an attached type	ed and signed letter.			
	Must include date of loss of income and subsequent em	pployment estimation.			
Step 2	: Reason for the Request				
	Loss of Student/Spouse/Parent Income due to divorce, death, or separation of the parents.  Typical Supporting Documents: Legal separation papers, verification from attorney, or divorce decree; death certificate; signed 2024 tax return and signed current year tax return.				
	Loss of Student/Spouse/Parent Income due to job loss or termination.  Typical Supporting Documents: Letter, on company letterhead, indicating last day of employment, date of final paycheck, severance pay information; signed 2024 tax return and signed current year tax return.				
	Loss of Student/Spouse/Parent Income due to health, disability, injury or natural disaster.  Typical Supporting Documents: Documentation of unemployment compensation, disability benefits, SS benefits; signed 2024 tax return and signed current year tax return.				
	Loss of a one-time "lump sum" payment of money Typical Supporting Documents: Documentation ex death, etc; signed 2024 tax return and signed curre	xplaining source of nonrecurring income military bonus, divorce,			
Step 3:	Submit Attached Household Verification and S	Supporting Tax Documents			
nforma	-	cuments and information is complete. Verification of original FAFSA re are any discrepancies found, regardless of whether this Special current financial aid awards.			
By the solution will proform you	vide the required documents to verify the informati	fying that all information on the form is correct and that everyone ion. If you purposely give false or misleading information on this could result in being fined, sent to prison or both. Submission of e that the request will be granted.			
Student	: Signature	Date Signed			
Parent :	1/Guardian 1/Spouse Signature	Date Signed			
Parent 2/Guardian 2/Spouse Signature		Date Signed			



## 2026-27 Household Verification

Student Name:(Last, First, MI)		Studer	nt ID:		
Information:  Your application has been selected for Verification by the Department of Education, we are required by Federal Law (34 CRF, Part 668) to compare the information from your FAFSA with the information requested below. Upon submitting this form:  We will update your FAFSA, if needed, based on the information provided on these forms.  We cannot continue processing your financial aid until all required financial aid documents have been submitted.					
All required documents must be submitted to our office AT LEAST two weeks before the end of term.					
List yourself (the student) first.  List yourself (the student) first.  If you are a Dependent, list your parent(s):  If you are a Dependent, list your parent to each other or are not married AND live together list both.  If your legal parent has married/remarried, list your legal parent and your stepparent.  If you are an Independent, list your Spouse, if married. If your spouse will be attending college AND enrolled in a degree or certificate program at least half-time between July 1, 2026 and June 30, 2027 provide the name and state of the college.  If you are a Dependent, list your parent(s) other children if your parent(s) will provide more than half of their support from July 1, 2026 through June 30, 2027.  If you are an Independent, list your children if you will provide more than half of their support from July 1, 2026 through June 30, 2027.  If you are an Independent, list your children if you will provide more than half of their support from July 1, 2026 through June 30, 2027.  List other people only if they now live with your parent(s) AND get more half of their support from your parent(s) AND will continue to get support from July 1, 2026 through June 30, 2027.  For those listed below who will be attending a college AND enrolled in a degree or certificate program at least half-time between July 1, 2026 and June 30, 2027, provide the name and state of the college. Do not include dual enrollment for high school students.  Attach a separate sheet if required.					
	Age	Relation to Student	Name and State of College		
		SELF			
Certification and Signature  I certify that all information reported on this form and in my supporting documentation is complete and correct.					
Student's Signature:			Date:		
Parent or Spouse's Signature:		Date:			