



## 2008-2009 SPECIAL CIRCUMSTANCE FORM

Student Name: \_\_\_\_\_ STUDENT ID# \_\_\_\_\_

You have recently made the Financial Aid Office aware or you have determined that your family's financial situation has changed from what was reported on the 2008-2009 Free Application for Federal Student Aid (FAFSA) or your family has incurred expenses not reflected on the FAFSA.

***Please note the following:***

- ❖ Anyone requesting an appeal for special circumstance(s) must also go through the verification process (if they have not already done so for this award year). The verification process requires a copy of 2007 Federal Income Tax Returns and 2007 W-2(s). If there are errors found on the FAFSA, it could result in a reduction of your financial aid.
- ❖ Filing this form does not guarantee that any change in your financial aid will occur.
- ❖ All requests are handled on a case-by-case basis and will be carefully reviewed. Once all required documentation is submitted, you will be notified in writing the results of your appeal within two (2) weeks.
- ❖ Please be sure to answer all parts of this form and attach all requested documentation. Failure to do so will delay your request.
- ❖ You will be notified in writing regarding the determination of your appeal approximately two weeks after submission of all required paperwork.

**Checklist** (use this to ensure all steps have been completed for a timely review by our office)

- \_\_\_ I/We have checked the appropriate circumstance(s) in Part I
- \_\_\_ I/We have attached a letter explaining the circumstance(s).
- \_\_\_ I/We have attached the required supporting documentation and reviewed this form for accuracy.
- \_\_\_ I/We have signed in Part IV. Even if appealing on change in parent's income, student must sign this form as well.

**Once complete, submit the entire Special Circumstance Form and supporting documentation to:**

Hiram College  
Financial Aid Office  
P.O. Box 67  
Hiram, OH 44234  
330-569-5499 (fax)

Should you have any questions regarding this form or your financial aid in general, please contact our office Monday through Friday, 8:30 a.m. until 5 p.m. at 330-569-5107.

**PART I: SUMMARY OF SPECIAL CIRCUMSTANCES**

Please mark the appropriate circumstance(s) below and submit the required documentation.

- Loss of earnings due to termination  
Income in 2008 for the parent or student will be less than what was reported on the 2008-2009 FAFSA.  
Required documentation:  
 Letter from employer or termination notice that confirms last date of employment;  
 Letter from employer regarding severance package or notice from Bureau of Unemployment services regarding unemployment benefits;  
 Last paystub from employer indicating year-to-date earnings.
- Reduction of taxable income due to layoff or reduction to wages  
Required documentation:  
 Provide a letter from employer stating effective date and anticipated return to work, pay rate change and/or reduction of hours;  
 Last pay stub indicating year-to-date earnings.
- Loss of untaxed income, such as child support or social security benefits  
Child support or social security benefits will cease once the student enrolls in college or turns eighteen.  
Required documentation:  
 Provide a letter or court document stating termination date of benefits and documentation of total benefits to be received in 2008.
- Divorce or separation (student or dependent student's parents)  
Parent(s) or student have separated or divorced since the 2008-2009 FAFSA was completed.  
Required documentation:  
 Provide copy of court order showing dates of separation or divorce;  
 Provide copy of custodial parent's most recent W-2;  
 Provide child support and/or alimony documentation.
- Death of parent or spouse  
Required documentation:  
 Copy of death certificate, newspaper obituary, or memorial service program;  
 Details of life insurance policy, if applicable;  
 Copy of most recent W-2(s) from the surviving parent.
- Private elementary and secondary school costs for student's siblings  
Required documentation:  
 Tuition expenses on school letterhead to be paid (minus any financial assistance received) between July 1, 2008 and June 30, 2009.
- Medical/dental expenses not covered by insurance  
Your family paid incurred significant medical/dental expenses not paid by insurance in 2007 and will continue in 2008  
Required documentation:  
 Provide copies of medical bills paid in 2007 or a copy of schedule A (itemized deductions) from 2006 Federal Tax Form 1040 if amount paid is listed on line 1 of that form.
- Other circumstance not listed above  
Please complete this form and provide our office with a detailed letter regarding your situation and we will notify you regarding the appropriate supporting documentation.

**PART II: VERIFICATION OF 2008-2009 FAFSA INFORMATION**

As indicated on page one of this form, all students requesting a re-evaluation of the application due to extenuating circumstances must also go through the verification process. Please complete Part IIA and Part IIB below. If you have already been selected for verification (previously notified by our office) and submitted the required paperwork, check here \_\_\_\_ and go to Part III of this form on page 4.

**IIA. HOUSEHOLD INFORMATION- List all members of your (your parents’) household as reported on the 2008-2009 FAFSA**

Name	Relationship to Student	Age	Name of College(if attending at least ½ time)
1)	Student		
2)			
3)			
4)			
5)			
6)			

**IIB. 2007 FEDERAL TAX RETURN(s) & 2007 UNTAXED INCOME**

All tax filers must attach a **signed and dated** copy of their 2007 federal tax return and W-2 (s).

Check the box for each person who did not and was not required to file a 2007 federal income tax return and attach their 2007 W-2(s):

student     student’s spouse     student’s (step)father     student’s (step)mother

2007 Income Information	Student/Spouse	Parent(s)
Total income earned from work (for non-filers) – attach W-2(s)		
Total child support received for all family members		
Untaxed Social Security benefits for all family members		
Welfare, including TANF		
Payments to tax-deferred pension and savings plans including, but not limited to box 12a-12d of W-2, codes D,E,F,G,H & S.		
Worker’s compensation		
Housing, food and other living expenses paid to members of the military, clergy and others		
Veterans non-education benefits, such as Death Pension or Dependency & Indemnity Compensation		
Any other untaxed income and benefits Explain:		

**PART III: 2008 ESTIMATED INCOME**

Enter the total yearly income that you (and your spouse), or you (and your parent/s) expect to receive from January 1, 2008 to December 31, 2008 from the sources indicated below.

If a question does not apply to you, write a zero (\$0) or "n/a" in the answer space.

	01/01/2008 until TODAY	TODAY Until 12/31/2008
<b>PARENTS</b>		
Mother's earnings from work – attach most recent pay stub(s)		
Father's earnings from work – attach most recent pay stub(s)		
Interest and/or dividend income		
Taxable pensions/annuities		
IRA distributions		
Unemployment benefits		
Other taxed income (source: _____)		
Tax exempt interest income		
Worker's compensation		
Child Support received		
Contributions to tax-deferred IRA/pension plan		
Untaxed welfare benefits		
Untaxed social security benefits for all family members		
<b>STUDENT</b>		
Student's earnings from work – attach most recent pay stub		
Other taxable income (source: _____)		
Untaxed social security benefits		

**PART IV: CERTIFICATION STATEMENT**

All of the information on this form is true and complete to the best of my knowledge. If asked, I agree to provide further proof of the information I have given on this form. I understand that if I purposely give false or misleading information, I may be subject to a fine, prison sentence, or both.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Spouse's Signature (if applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent(s) Signature (if student is dependent)

\_\_\_\_\_  
Date

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