***Defiance College Special Circumstance Application***

***2023-2024***

Financial need is normally based on each student’s or families gross annual income from the previous tax year. If your income has recently decreased or you have an unforeseen financial hardship that was not taken into account on your Free Application for Federal Student Aid (FAFSA), we may be able to reevaluate your financial need based on your gross income for the 2022 tax-year (January 1, 2022-December 31, 2022) or projected 2023 year income. **Please remember that not all special circumstance recalculations will result in additional financial aid and cannot be appealed to the U.S. Department of Education.**

**Instructions:** For the rest of this form, if you are a dependent student, you must provide information for yourself and your parent(s). If you are an independent student, you must only provide information for yourself and your spouse (if married). Complete all sections that apply and attach required documentation.

Student Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Student ID: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_SSN:\_\_\_\_\_-\_\_\_\_\_-\_\_\_\_\_\_

Address\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Parent Email: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Briefly explain the circumstance in the box below** (or on a separate attached letter).
2. **What year did the special circumstance occur? □ 2021 □ 2022 (check the appropriate box)**

Please provide documentation for the year checked. If changes in income occurred in 2022, please provide documentation of income after June 1, 2022.

1. **Check all situations that apply and submit documentation listed.**

\_\_\_\_\_\_a) Unemployment, reduced employment or job change

* Last check stub(s) from previous employer
* Letter from previous employer stating the date of termination
* Benefit or denial letter of unemployment
* Check stub of new employment or statement stating employment status
* W-2 and federal tax transcript from the IRS for the special circumstance year

\_\_\_\_\_\_b) Retirement

* Last check stub(s) from employer
* Letter from employer stating date of retirement
* Letter from employer stating the retirement pension
* W-2 and federal tax transcript from the IRS for the special circumstance year

\_\_\_\_\_\_c) Separation or Divorce (since filing the FAFSA)

* Court documentation verifying legal separation or divorce
* A letter from the parent or student stating: 1) number of dependents living in the household, 2) child support received for the dependent children 3) Total amount of assets (excluding the home)
* W-2 and federal tax transcript from the IRS for the special circumstance year

\_\_\_\_\_\_d) Death of a Parent or Spouse

* Copy of the Death Certificate
* Social Security Benefits received for all members of the household
* W-2 and federal tax transcript from the IRS for the special circumstance year

\_\_\_\_\_\_e) Reduced or Terminated Untaxed Income

* Last check stub or printout of benefit received
* Letter from agency verifying date and year to date amount of benefits lost
* W-2 and federal tax transcript from the IRS for the special circumstance year

\_\_\_\_\_\_f) Unusual Medical Expenses paid but not covered by insurance

* Re W-2 and federal tax transcript from the IRS for the special circumstance year
* Receipts of Medical/Dental payments paid in 2021 and 2022 (Outstanding bills that have not been paid will not be counted)
* Proof of expenses paid with no insurance coverage

\_\_\_\_\_\_g) Other

* Documentation of loss of income
* Official documentation to support the loss of income

1. **Signatures**

To the best of my knowledge, all of the information on this form is true and complete. If asked by the Financial Aid Office, I agree to provide additional documentation necessary.

Student\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_Parent\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date\_\_\_\_\_\_\_\_\_\_\_\_

1. **Return all required documentation by mail or fax to:**

Defiance College, Financial Aid Office, 701 N. Clinton Street, Defiance, OH 43512

Fax: 419-783-2579 Email: [financialaid@defiance.edu](mailto:financialaid@defiance.edu)