Eligibility
The Office of Financial Aid realizes that some students have special circumstances that affect their ability to pay for college. Many times the information on the FAFSA no longer reflects your current resources. In order to accurately assess your resources we ask you to complete this form. This information sheet outlines the types of circumstances we are able to consider and the request process. Should you wish to have our office review your circumstances please complete the Special Circumstances Review Request form.

Circumstances We Consider for Review
1) Death of a Spouse
2) Divorce and Legal Separation
3) Change in Financial Resources
   - Unemployment or significant change in earnings
   - Disability of student or spouse
   - Loss of non-recurring income or benefits
   - One-time income

Circumstances We Do Not Consider
Due to limited funding, our office is unable to consider the following types of expenses or adjustments to income when determining your financial aid eligibility.
   - Losses from real estate, business or investments in the current year
   - Consumer debt, including credit card debt

Timing of the Request Process
Students that experience a change in the household size due to death of a spouse or divorce/separation will have their information reviewed upon receipt of a completed Special Circumstance Review Request Form. Forms may be submitted at any time and we encourage students to provide the information as early as possible.

Students that experience a change in their financial circumstances will be asked to complete the Special Circumstance Review Request after receipt of the initial award notification. We ask that at least three months elapse from the initial change in circumstance prior to completing this request. This allows our office to use financial figures that better estimate the change in your resources.

Steps to Completing the Special Circumstance Process
1. Complete your FAFSA.
2. Complete the Special Circumstance Review Request Form and attach any supporting documentation requested.
3. Submit a letter explaining your special circumstance.
4. Students will be notified once their request has been reviewed.
   Email notification will be sent for revisions in the student’s financial aid award.
**Estimated Income**
Please complete the estimated income grid on the Special Circumstances Review Request Form. Make sure to complete any anticipated income from both taxable and non-taxable sources. Report the information in annual amounts and include a total for each source.

If you have income from a source not listed please indicate that source on the line labeled “Other” and explain the income type.

**Required Documentation**
Along with the Review Request you must submit:
- Signed copy of your (and your spouse, if applicable) 2010 U.S. tax return
- 2011-12 Independent Verification Worksheet

**Supporting Documentation**
Below is an example of supporting documentation needed for the different types of special circumstances. Please make sure to attach appropriate documentation to support your request.

1) Death of spouse
- Copy of death certificate
- Copy of both your and your spouse’s 2010 W-2 forms
- Statement from your spouse’s employer, insurance company and/or Social Security Administration detailing the amount and duration of death benefits.

2) Divorce/separation
- Copy of court-filed legal separation document or divorce decree which state’s 1) date of divorce/separation, 2) list of current household members, 3) amount and duration of child support 4) educational support, 5) alimony or maintenance support paid, 6) division of assets.
- Copy of both your and your spouse’s 2010 W-2 forms
- Documentation to verify separate households (i.e. separate lease agreements)

3) Unemployment or significant drop in income
- Letter from employer(s) indicating date of termination of employment, reduction in working hours or reduction in salary or wages.
- Copy of last pay stub(s) from previous employment (including 2011 year-to-date earnings).
- Copy of most recent pay stubs from new employer (including 2011 year-to-date earnings).
- Documentation, including amount and duration of benefits such as severance, lump sum buyout, sub-pay or retirement income.
- Documentation of unemployment benefits.

4) One-time income (capital gain from property sale, inheritance, severance pay, etc.)
- Letter explaining the type and amount of one-time income that was received in 2010 and will not be received in 2011.
- Documentation to verify how money was spent or invested.

5) Disability of student or spouse that has prevented employment for at least twelve weeks in 2011.
- Supporting medical documentation.
- Statement from employer or insurance company detailing amount and duration of disability benefits.

6) Loss of non-recurring income or benefits
- Copy of documentation from the appropriate agency indicating current benefits, reduction in benefits, and/or when benefits ended.

7) Medical or dental expenses that exceeded five-percent of your adjusted gross income.
- Provide a copy of the Schedule A from your 2010 federal income tax return.
- If deductions were not itemized on the tax return provide proof of insurance premiums paid and an itemization and copies of medical/dental costs paid in 2010 which were not covered by insurance.
- Do not include amounts covered by insurance, flex benefits or insurance premiums paid by your employer.
2011-12 Special Circumstances Review Request - Independent

Student Name ___________________________________________ ID Number________________

1. Reason for Request
   o Death of spouse           o Legal separation/divorce
   o Unemployment or significant drop in income  o Disability of a primary wage earner
   o Loss of child support/social security benefits  o One-time income
   o Other income reduction – please specify ____________________________________________________

2. Provide an accurate itemization of all income you and your spouse expect to receive or have already received between January 1, 2011 and December 31, 2011. Please report annual amounts.

   Taxable Income
   a. Wages, salaries and tips  $ ____________  $ ____________  $ ____________
   b. Unemployment benefits/ Severance  $ ____________  $ ____________  $ ____________
   c. Retirement/pensions/annuities  $ ____________  $ ____________  $ ____________
   d. Alimony  $ ____________  $ ____________  $ ____________
   e. Interest/dividend income  $ ____________  $ ____________  $ ____________
   f. IRA distribution  $ ____________  $ ____________  $ ____________
   g. Other (specify) (capital gains, partnerships/trusts rents, royalties, business/farm income)  $ ____________  $ ____________  $ ____________

   Total Taxed Income  $ ____________

   Untaxed Income
   a. AFDC/ADC or TANF  $ ____________  $ ____________  $ ____________
   b. Social Security benefits/SSI  $ ____________  $ ____________  $ ____________
   c. Disability/worker’s compensation  $ ____________  $ ____________  $ ____________
   d. Child support received  $ ____________  $ ____________  $ ____________
   e. Other (specify) (payments to tax deferred pensions)  $ ____________  $ ____________  $ ____________

   Total Untaxed Income  $ ____________

   Credits/Payments
   a. Education credits  $ ____________  $ ____________  $ ____________
   b. Child support paid  $ ____________  $ ____________  $ ____________

   Total Credits/Payments  $ ____________

3. Required Documentation:
   Include 2011-12 Independent Verification Worksheet, with signed copies of your and your spouse’s 2010 U.S. tax returns. Please provide all supporting documentation for your special circumstance.

4. Explanation of Special Circumstances
   Please attach a letter explaining your special circumstances.

5. Certification
   I hereby certify that the information contained on this form and attached documentation represents all anticipated sources of income for the 2011 calendar year. I agree to provide any additional information requested by the Office of Financial Aid to support the above estimates.

   Student Signature: ___________________________________________ Date: _____________________

   Spouse Signature: ___________________________________________ Date: _____________________

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