

This form is used to re-evaluate your eligibility for 2021-22 financial aid, in cases where there have been **involuntary changes** in your parent's income or employment, a recent divorce, death, disability, or other unplanned circumstances that have changed the total income of the family. A re-evaluation is not an assurance that you will qualify for more or additional need-based aid. A professional judgment to adjust your FAFSA information is done on a case-by-case basis when all supporting documentation is submitted. *Please allow up to four weeks for a review.*

The Free Application for Federal Student Aid (FAFSA) for 2020-2021 required you to report actual income information from **2019**. If your family circumstances have substantially changed since then, reducing your ability to contribute to your educational expenses, you can request a review of your special circumstances.

Special circumstance adjustments for job reduction or loss are subject to change if the income you anticipate for 2021 is not accurate. Please wait to complete your appeal until you are reasonably certain of your parent's projected income for 2021, including unemployment.

Some reasons include:

- (a) Unemployment or retirement of a parent
- (b) Death or disability of a parent
- (c) Separation and Divorce
- (d) Loss of untaxed income or child support
- (e) Unusual medical expenses (in excess of 11% of AGI)

If your family circumstances fall within one or more of these criteria, please follow these instructions:

1. COMPLETE THE SPECIAL CIRCUMSTANCES FORM FOR DEPENDENT STUDENTS.
2. FURNISH THIS OFFICE WITH SUPPORTIVE DATA FROM THE APPROPRIATE PERSON(S) OR AGENCY (IES) ON THEIR LETTERHEAD STATIONARY.

For example:

A letter from a doctor indicating date of disability, and any other information pertinent to the disability should support disability of a wage earner. In addition, a statement from each source of income indicating the amount provided per week or month and the duration of support.

Supportive data may involve a statement from a doctor, a lawyer, or employer, Government Unemployment Office, Social Security Office, Death Certificate or any other pertinent documentation.

3. IF YOU HAVE NOT ALREADY DONE SO, YOU MUST SUBMIT VERIFICATION OF YOUR 2019 INCOME ON THE FAFSA. Verification requirements are met by using the IRS Data Retrieval on the FAFSA or by submitting a copy of the Tax Return Transcript for 2019, and completing a Verification for Dependent Student form for 2021-22.

DEPENDENT STUDENT

Internal use **ONLY**
Reviewed: _____
Scanned: _____
EVALFD-SC1

Special Circumstance Form

Student Name _____	ID # _____
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Please complete form in blue or black ink. Incomplete forms will not be accepted.

Please wait to appeal until you are reasonably certain of your projected income for 2021, including unemployment.

1. Please review the sections below and indicate which explanation(s) applies to the reason(s) your family's **2021** income will be reduced.

Divorce of Parents (since date of filing the 2021-22 FAFSA)

SUBMIT COPY OF DIVORCE JUDGEMENT & PARENT'S W2s from 2019 AND 2020

Death of Parent (death must have occurred **on or after** January 1, 2020).

Date: / / _____
Month / Day / Year **Relationship**

SUBMIT COPY OF DEATH CERTIFICATE

Permanent and total disability of parent (must have occurred **on or after** January 1, 2020).

Date: / / _____
Month / Day / Year **Relationship**

Parent has retired; been unemployed or under-employed for **at least two full months** or will experience a change in employment status due to enrollment in a post secondary institution. **MUST HAVE DOCUMENTATION FROM EMPLOYER** such as termination letter, layoff notice, final paystub, new paystub from current job, unemployment benefits notice, etc.

Date: / / _____
Month / Day / Year **Relationship**

YOU MUST INCLUDE A COPY OF YOUR PARENT(S) 2020 FEDERAL INCOME TAX FORM
If the change occurred in 2020, and related W2 forms, AND

YOUR 2021-22 VERIFICATION WORKSHEET FOR DEPENDENT STUDENTS.

Untaxed income has ceased or been reduced. Source of untaxed income _____.

Date: / / _____
Month / Day / Year

Unusual medical expenses in excess of 11% of adjusted gross income.
Must include receipt of all bills paid out-of-pocket in 2019 **or** 2020, per IRS definition of allowable medical expenses.
Summary statement of total family medical expenses paid for the year is required.

2. You must provide an explanation detailing all reasons your family's 2021 income will be reduced and complete the rest of the form. (attach a separate sheet of explanation if needed)

3. **Include** third party documents to support your request; e.g. Death Certificate, Termination Letter, Complaint for Divorce or Divorce Judgment. **This request must be SUBMITTED WITH THIRD PARTY DOCUMENTATION.**

NOTE: If you are reporting a change in taxable income, even if you filed the FAFSA with the IRS Data Retrieval tool, Federal 1040 Tax Return Transcript or a copy of the IRS 1040 Tax Return Form (all pages) for 2019 is required.

*For the parent whose income has changed, please carefully complete the Estimated 2021 Income section by reporting the income already received in 2021, as well as the funds you anticipate receiving for the remainder of 2021. If your actual income for 2021 is higher than your estimates, you must submit corrected information promptly. Your student will be responsible for repaying any financial aid funds received from this re-evaluation if the information provided is not reasonably accurate. Please estimate income **ONLY** for the parent whose circumstances are changing due to one of the "special circumstances" reported.*

4. **Complete** either the Mother's or Father's income change (Gross Taxed and Untaxed) below with income prior to exemptions, adjustments, or deductions; you expect to receive from **January 1, 2021 until December 31, 2022.**
IF NONE, ENTER "0".

TOTAL 2021 Estimated Gross Taxable Income	Mother's Anticipated Income 2021	OR	Father's Anticipated Income 2021
			\$ Rec'd '21
1. Wages, salaries, tips (received to date in 2021) PLUS anticipated Wages for the remainder of 2021	\$ Expected		\$ Expected
2. Severance pay	\$		\$
3. Pensions and annuities for 2021	\$		\$
4. Interest and dividend income anticipated for 2021	\$		\$
5. Business or farm income anticipated for 2021	\$		\$
6. Capital gains anticipated for 2021	\$		\$
7. Income received from rents after expenses paid for mortgage interest, taxes, and insurance	\$		\$
8. Alimony which will be received in 2021	\$		\$
9. Unemployment Compensation (State and/or SUB) Received to date & anticipated for remainder of 2021	\$		\$
10. Any other taxed income, including Social Security	\$		\$
Total Estimated 2021 Gross Taxable Income	\$		\$

TOTAL 2021 Estimated Untaxed Income	Mother's Anticipated Untax. Income 2021	OR	Father's Anticipated Untax. Income 2021
			\$
1. Payments to tax-deferred pension & savings plans (paid directly or withheld from earnings). Include untaxed portion of 401(k) and 403(b) plan-W2 Box 12	\$		\$
2. Retirement or disability benefits anticipated for 2021	\$		\$
3. Workers' Compensation to be received in 2021	\$		\$
4. Welfare benefits including TANF (excluding SNAP)	\$		\$
5. Untaxed portion of pensions	\$		\$
6. Living & housing allowances (excluding rent subsidies for low-income housing) for clergy, tribal, military, and others (include cash payments or cash value of benefits)	\$		\$
7. Child support or maintenance payments which will be received for the student <i>and</i> ALL children. (Include cash support or money paid on student's behalf from non-custodial parent)	\$		\$
8. Veterans benefits, except student's educational benefits. Include VA disability, death pension & DIC.			
9. Railroad Retirement benefits or Tribal benefits			
10. Any other untaxed income and benefits for 2021	\$		\$
Total 2021 Untaxed Income	\$		\$

Please include pay stubs and unemployment statements that support your projected 2021 income.

REMINDER: If you are requesting an income adjustment, a 2021-22 Verification Worksheet for Dependent Students and a copy of your 2019 Federal Income Tax Form or Tax Return Transcript must be on file before your special circumstance request can be reviewed.

The penalty for submission of fraudulent information on this form may be repayment of TRIPLE any amount of money received plus a fine and/or imprisonment.

Student's Signature

Date

Parent's Signature

Date

Parent's Signature (if married)

Date

OFFICE USE ONLY

Director's Signature

Date

- Approve**
 Disapprove
 More Info. Req'd.

RETURN FORMS TO:

Lake Superior State University
 Financial Aid Office
 650 West Easterday Avenue
 Sault Ste. Marie, MI 49783-1699
 Fax: 906-635-6669
 Email: finaid@lssu.edu