

Occasionally, unusual circumstances exist that may warrant reconsideration of financial aid eligibility. These special circumstances may be either changes that have occurred in your family circumstances since you filed the Free Application for Federal Student Aid (FAFSA) or unusual family circumstances not accounted for on the FAFSA. On the following pages we have listed the circumstances that most commonly qualify a student to file a Special Circumstances request. Select as many circumstances that fit your current situation.

The Free Application for Federal Student Aid (FAFSA) for 2022-2023 required you to report actual income information from **2020**. 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.

**To Qualify for a Special Circumstances Review, You Must:**

- Write a letter explaining your particular situation
- Choose one or more of the situations outlined on the following pages
- Complete all pages of this form
- Provide all requested documentation

If your circumstance(s) does NOT fit into one of the options, you may still file the Special Circumstances Form. Please attach a letter explaining your situation as well as any supporting documentation.

**Please note: Filing this appeal does not guarantee additional financial aid. Some appeals may only result in the student receiving the maximum in subsidized loan eligibility and/or Pell grant eligibility. Please allow 3-4 weeks for processing.**

Student Name: \_\_\_\_\_ Student ID Number: A \_\_\_\_\_

Phone Number: \_\_\_\_\_ E-mail: \_\_\_\_\_

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By signing this worksheet, I certify that all of the information reported to qualify for federal student aid is complete and correct. All attachments and supporting documents are true to the best of our knowledge. I further understand that purposely giving false or misleading information may result in a fine, jail terms, or both.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Please return your completed form to the LSSU Financial Aid Office by fax, U.S. mail, or in person. Be sure to include your name and ID Number on all pages. Missing information may delay processing.

Internal use <b>ONLY</b> Reviewed: _____ Scanned: _____ EVALFD-SC1
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### Loss of Income

Reduction or loss of income from work must be for at least ten (10) weeks or sufficient documentation of change and new employment.

- Student Date of layoff/termination: \_\_\_\_\_
- Spouse Date of layoff/termination: \_\_\_\_\_
  - Has the student started another job?  No  Yes If yes, give start date: \_\_\_\_\_
  - Has the spouse started another job?  No  Yes If yes, give start date: \_\_\_\_\_

**Documentation Required:**

- A letter from employer verifying loss of employment including effective date
- A copy of the last pay statement showing gross year-to-date income for **all** jobs worked for **both** student and/or spouse  
*\*If more than one employer per student and/or spouse, please include start/end dates in written statement.*
- Documentation of unemployment benefits from state agency
- Documentation of severance pay received, or IRA's, stocks, bonds, pensions, etc. converted to cash.

### Loss of Child Support

Name of Child: \_\_\_\_\_ Amount received in 2022: \$ \_\_\_\_\_ Date support ended: \_\_\_\_\_  
 Name of Child: \_\_\_\_\_ Amount received in 2022: \$ \_\_\_\_\_ Date support ended: \_\_\_\_\_

**Documentation Required:**

- A copy of legal separation/divorce papers that specifies amount of child support
- Statement from the Friend of the Court documenting amount of child support

### Separation or Divorce since 2020

Please note that you must be residing in separate households and provide documentation.

Date of separation/divorce: \_\_\_\_\_

**Documentation Required:**

- A copy of student's most recent pay statement; and
- A copy of legal separation/divorce papers; and
- Documentation of spousal support and/or child support.

### Death of a Spouse since 2020

Date of death: \_\_\_\_\_

**Documentation Required:**

- A copy of the death certificate; and
- Describe survivor benefits that are to be received including amounts and payment terms; and
- Student's 2022 income information.

### Medical or Dental Expenses paid by you in 2020, 2021, and/or 2022

Please select the year you wish to claim:  2020  2021  2022

**Documentation Required:**

- Submit a copy of Schedule A – itemized Deductions from your federal tax return; or
- Submit copies of supporting documents as proof of out of pocket payments.

**Additional Information:**

- Do **not** include payments covered by insurance or other resources.
- **Please note:** we cannot take into consideration payments made by insurance, unpaid invoice, handwritten confirmations of payments, or explanations of benefits or account statements.

## Receipt of One-Time Income

Consideration for and one-time income may only be reviewed once during a student's enrollment at LSSU.

### Documentation Required:

- A signed copy of your 2020 Federal Tax Return and/or 1099 form
- Written statement explaining reason for early withdrawal



## Other Circumstances not addressed in the above categories

### Documentation Required:

- Submit a statement that explains changes in your financial and/or family situation. If appropriate, please provide supporting documentation

Please list the names and ages of all the members of your household\* during the 2022-2023 academic year. Also, please indicate which family members will be enrolled at college at last half-time (6+ credits) during 2022-2023 and which institution they are planning to attend.

\*The term "Household" is defined as follows:

The household includes yourself (and if married, your spouse), your children (even if they do not live with you) who will receive more than half of their support from you, and other people (not your children or your spouse) who live with you and receive more than half of their support from you, and will continue to receive more than half their support from you between July 1, 2022 through June 30, 2023. You may include unborn children if they will be born during the school year.

Name	Age	Relationship	Name of College
		Self	LSSU

## Expected Total Income and Benefits

Use this form to document special circumstance for your household incomes received to date and to provide your best faith estimate of **all** sources of income for 2022. Please enter **zero** to indicate you do not have any types of taxable or untaxed income to report.

All sources of income for 2022	Year to Date 1/1/2022 - Today	Estimated Today – 12/21/22
<b>Student</b> Total Wages, Salaries, Tips	\$ _____	\$ _____
<b>Spouse</b> Total Wages, Salaries, Tips	\$ _____	\$ _____
Other <b>Taxable</b> Income: _____	\$ _____	\$ _____
Other <b>Taxable</b> Income: _____	\$ _____	\$ _____
Other <b>Untaxed</b> Income: _____	\$ _____	\$ _____
Other <b>Untaxed</b> Income: _____	\$ _____	\$ _____
<b>REQUIRED</b>	<b>Student &amp; Spouse (if applicable)</b>	
As of today, what is your (and your spouse's) total current balance of cash, savings, and checking accounts?	\$ _____	\$ _____
As of today, what is the net worth of your (and your spouse's) investments, including real estate? <b>Don't</b> include the home in which your parents live. Net worth mean current market value minus debt.	\$ _____	\$ _____
As of today, what is the net worth of your (and your spouse's) current business and/or investment farms? Don't include a family farm or family business with 100 or fewer full-time or full-time equivalent employees.	\$ _____	\$ _____

Examples of **taxable** income: Unemployment compensation, taxable portion of Social Security benefits, severance pay, interest income, dividends, capital gains, alimony, pensions, annuities, IRS's, rents, royalties, partnerships, estates, trusts, life insurance payments, early withdrawal from 401k.

Examples of **untaxed** income: Child support received for all children, worker's compensation, veteran's death benefits, disability, living allowances (housing, food, pensions, annuities, etc.) for military/clergy/other.

<b>OFFICE USE ONLY</b>	
_____	
Director's Signature	Date
	<input type="checkbox"/> <b>Approve</b> <input type="checkbox"/> <b>Disapprove</b> <input type="checkbox"/> <b>More Info. Req'd.</b>

<b>RETURN FORMS TO:</b>
Lake Superior State University
Financial Aid Office
650 West Easterday Avenue
Sault Ste. Marie, MI 49783-1699
Fax: 906-635-6669
Email: <a href="mailto:finaid@lssu.edu">finaid@lssu.edu</a>