

2023-2024 Special Circumstances: Dependent Student

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 2023-2024 required you to report actual income information from **2021**. 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 ID Number: A | | |
|---|--|--|
| E-mail: | | |
| formation reported to qualify for federal student aid is ng documents are true to the best of our knowledge. I further information may result in a fine, jail terms, or both. | | |
| Date: | | |
| Date: | | |
| <u></u> | | |

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 ONLY
Reviewed:____
Scanned:___
EVALFD-SC1

| Reduction or loss of income from work must be for at change and new employment. | least ten (10) weeks or sufficient documentation of |
|--|---|
| ☐ Parent 1 (father/mother/stepparent) | Date of layoff/termination: |
| ☐ Parent 2 (father/mother/stepparent) | Date of layoff/termination: |
| ☐ Student | Date of layoff/termination: |
| Has the parent started another job? □No □ Yes | If yes, give start date: |
| Has the student started another job? □No □ Yes | If yes, give start date: |
| Documentation Required: A letter from employer verifying loss of employment A copy of the last pay statement showing gross year- *If more than one employer per parent, please include Documentation of unemployment benefits from state Documentation of severance pay received, or IRA's, | -to-date income for all jobs worked for both parents de start/end dates in written statement. |
| Death of a Parent since 2021 | |
| ☐ Mother/Stepmother Date of death: | |
| ☐ Father/Stepfather Date of death: | |
| A copy of the death certificate; and Describe survivor benefits that are to be received include Surviving parent's 2023 income information. | ling amounts and payment terms; and |
| Separation or Divorce of Parents since 2021 | |
| Please note that your parents must be residing in separate | households and provide documentation. |
| Date of separation/divorce: | .: |
| Which parent will the student live with or which parent with D Mother/Stepmother D Father/Stepfather | will provide the most financial support? |
| <u>Documentation Required:</u> | |
| A copy of supporting parent's most recent pay statement | nt· and |
| A copy of legal separation/divorce papers; and | |
| Documentation of spousal support and/or child support | |
| Medical or Dental Expenses paid by your family in 202 | 1, 2022, and/or 2023 |
| Please select the year you wish to claim: \square 2021 \square 2022 | 2 🗆 2023 |
| <u>Documentation Required:</u> Submit a copy of Schedule A – itemized Deductions from | |
| Submit copies of supporting documents as proof of out | of pocket payments. |

Additional Information:

Loss of Income

- 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 2021 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 2023-2024 academic year. Also, please indicate which family members will be enrolled at college at last half-time (6+ credits) during 2023-2024 and which institution they are planning to attend.

*The term "Household" is defined as follows:

The household includes yourself, your parents and your parents' other children if (a) your parents provide more than half of their support or (b) the children would be required to provide parental information when applying for Federal Student Aid. Include other people only if they now live with your parents, and your parents provide more than half of their support and will continue to provide more than half their support from July 1, 2023 through June 30, 2024.

| Name | Age | Relationship | Name of College |
|------|-----|--------------|-----------------|
| | | Self | LSSU |
| | | | |
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Expected Total Income and Benefits

Use this form to document special circumstance for your parent's household incomes received to date and to provide your best faith estimate of **all** sources of income for 2023. Please enter **zero** to indicate you to not have any types of taxable or untaxed income to report.

| All sources of income for 2023 | Year to Date 1/1/2023 - Today | Estimated Today - 12/31/23 |
|--|----------------------------------|-------------------------------|
| Parent 1 Name: Total Wages, Salaries, Tips | \$ | \$ |
| Parent 2 Name: Total Wages, Salaries, Tips | \$ | \$ |
| Student Total Wages, Salaries, Tips | \$ | \$ |
| | | |
| Other Taxable Income: | \$ | \$ |
| Other Taxable Income: | \$ | \$ |
| Student Oher Taxable Income: | \$ | \$ |
| | | |
| Other Untaxed Income: | \$ | \$ |
| Other Untaxed Income: | \$ | \$ |
| Student Oher Untaxed Income: | \$ | \$ |
| REQUIRED | Parent(s) | Student |
| As of today, what is your total current balance of cash, savings, and checking accounts? | \$ | \$ |
| As of today, what is the net worth of your investments, including real estate? Don't include the home in which your parents live. Net worth means current market value minus debt. | \$ | \$ |
| As of today, what is the net worth of your 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, ect.) for military/clergy/other.

| OFFICE USE ONLY | | ☐ Approve ☐ Disapprove |
|----------------------|------|---------------------------|
| Director's Signature | Date | ☐ 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