

2023-2024 SPECIAL CIRCUMSTANCE REQUEST

Phone: Fax: Address: Email:

(559) 494-3012 (800) 643-0932 995 N. Reed Ave. reedley.financialaid@reedleycollege.edu

This form is to request an income adjustment to your 2023-2024 Free Application for Federal Student Aid (FAFSA) due to a loss of income, benefit, or because of unusual circumstances during the calendar or academic year.

All students MUST submit the following documentation regardless of circumstance:

DEPENDENT STUDENT	INDEPENDENT STUDENT
 ✓ Student's current check stub (if employed) ✓ Father's current check stub (if employed) ✓ Mother's current check stub (if employed) ✓ Current check stubs or statements for all untaxed benefits ✓ Signed copies of parent's and student's 2021 taxreturn transcript, schedules, and all W-2's ✓ Signed copies of parent's and student's 2022 taxreturn transcript, schedules, and all W-2's ✓ Signed copies of parent's and student's 2023 taxreturn transcript, schedules, and all W-2's* *If you are completing this form after January 2024 	 ✓ Student's current check stub (if employed) ✓ Spouse's current check stub (if employed) ✓ Current check stubs or statements for all untaxed benefits ✓ Signed copies of student's and spouse's 2021 taxreturn transcript, schedules, and all W-2's ✓ Signed copies of student's and spouse's 2022 taxreturn transcript, schedules, and all W-2's ✓ Signed copies of student's and spouse's 2023 taxreturn transcript, schedules, and all W-2's* *If you are completing this form after January 2024

Submit the documentation required below depending on your situation. Special Circumstance Requests are reviewed on a case-by-case basis. You may be required to submit additional documentation after our initial review. Prior to completing this form, we recommend you contact our office to verify which tax year's information is needed.

CIRCUMSTANCE:	IF YOU ARE FILING THIS	IF YOU ARE FILING THIS
	REQUEST DURING 2023:	REQUEST DURING 2024:
Loss of Employment: Student/Spouse/Parent was working but is now unemployed or earning less income.	 Last pay check stub(s) from all previous jobs in 2023 Letter from previous employer(s) indicating last date of employment Award notification letter or current print out from Employment Development Department (EDD) indicating amount of unemployment compensation paid, if applicable 	 Last pay check stub(s) from all previous jobs in 2024 Letter from previous employer(s) indicating last date of employment Award notification letter or current print out from Employment Development Department (EDD) indicating amount of unemployment compensation paid, if applicable
Loss of Benefit: Student/Spouse/Parent has lost all or a portion of a cash benefit.	 Last pay check stub(s) or current print out of benefit(s) received in 2023 Letter from agency that provided benefit verifying when the benefit was terminated 	 Last pay check stub(s) or current print out of benefit(s) received in 2024 Letter from agency that provided benefit verifying when the benefit was terminated
Deduction of a One-Time Payment: Student/Spouse/Parent received a one- time payment such as a pension, IRA, annuity, gambling winnings, settlement, etc. and the payment was used to cover expenses.	 Documentation verifying the amount, purpose, and date of the payment Receipt(s) and/or other documentation showing how payment was spent Copies of two most recent bank statements for all bank accounts 	 Documentation verifying the amount, purpose, and date of the payment Receipt(s) and/or other documentation showing how payment was spent Copies of two most recent bank statements for all bank accounts
Change in Marital Status: Student/Parent is now married, separated or divorced	Court documents verifying legal separation, divorce, or marriage	Court documents verifying legal separation, divorce, or marriage
Death of Spouse or Parent: Spouse/Parent passed away after the FAFSA was filed.	Death Certificate	Death Certificate
Unusual Expenses: Student/Spouse/Parent incurred and paid for medical expenses not covered by insurance or private school tuition.	 Copies of original bill(s) Copies of receipt(s) or document(s) verifying payment 	 Copies of original bill(s) Copies of receipt(s) or document(s) verifying payment



2023-2024 SPECIAL CIRCUMSTANCE REQUEST

STUDENT INFORMATION:

Student Signature

Name:		STUDENT ID	#:		
E-mail address:	Phone Numbe	r:			
EXPLANATION OF CIRCUMSTANCE (check	all that	apply):			
☐ Loss of employment	☐ Cl	nange in Marital Status			
☐ Loss of benefit	☐ De	eath of spouse or parent	•		
☐ Deduction of one-time payment	☐ Ui	nusual expenses			
Give specific dates and reasons as to when and why incom If you need more space, attach a separate sheet of paper.	_	occurred - be specific and list	events in chronological order.		
VERIFICATION OF HOUSEHOLD SIZE:					
Write in the names of all household members. Also write parents) who will be attending college at least half-time b certificate program. If you need more space, attach a separent space, attach a separent space.	etween Jul	y 1, 2023 and June 30, 2024			
 Dependent Students: Include yourself, your parent(s) (including steppare Your parent(s) dependent children, even if they do OR if they would be required to give parental infor Other dependents ONLY IF they now live with your 07/01/2023 to 06/30/2024. 	n't live with mation who	n your parents if your parents en filling out a FAFSA	provide more than half of their support		
Independent Students: - Include yourself and your spouse i f you are legally - Your children if you provide more than half of their selection. - Other dependents ONLY IF they live with you and you	support fro				
Full Name	Age	Relationship to Student	Name of College		
CERTIFICATION:		<u> </u>	I		
I/We certify that all the information reported to qual understand that if additional documentation is require Circumstance Request will be denied. I/we also undefined, jailed, or both.	ed, I/we v	vill submit those document	s in a timely manner or my Special		

FD23CSCR REV 11/8/22

Parent Signature (required if student is dependent)

Date

Date

STUDENT/SPOUSE INCOME INFORMATION

Student/Spouse Tax Filing Status (check one box only):

I/WE HAVE FILED a 2021 federal income tax return (attached is a copy of a tax return transcript). Contact IRS at 1-800-908-9946 for a copy of your tax return transcript.
I/WE DID NOT WORK and are not required to file a 2021 federal tax return.
I/WE WORKED but did not file a 2021 federal income tax return.

Student/Spouse income information - Include wages earned from work, business or investment income, pension disbursements, unemployment compensation and all other income sources

Type of Income	Received in 2021	Received in 2022	Estimated for 2023
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$

Other Income - Enter the total amounts for the year	Received in 2021	Received in 2022	Estimated for 2023
Child support PAID. Do not include support for children in your household.	\$	\$	\$
Taxable earnings from need-based employment programs such as Federal Work Study.	\$	\$	\$
Combat pay or special combat pay - only enter the amount that was taxable and included in your Adjusted Gross Income (AGI).	\$	\$	\$
Payments to tax-deferred pension and savings plans including, but not limited to, amounts reported the W-2 form in boxes 12a through 12d, codes D, E, F, G, H, and S.	\$	\$	\$
Child support RECEIVED for all children in the household. Don't include foster care or adoption payments.	\$	\$	\$
Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits). Don't include the value of on-basis military housing or the value of a basic military allowance for housing.	\$	\$	\$
Veterans non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and /or VA Educational Work-Study allowances.	\$	\$	\$
Other untaxed income not reported, such as worker's compensation, disability, etc. DO NOT include student aid, welfare (TANF) payments, untaxed Social Security benefits, SSI, combat pay, flexible spending arrangements.	\$	\$	\$
Money received, or paid on your behalf (e.g. bills), not reported elsewhere on this form.	\$	\$	\$

Asset Information — Enter the value of any assets as of the day you filled out this form	Current Value	Current Debt
What is your/your spouse's total current balance of cash, savings, and checking accounts?	\$	xxxxxxxxxx
What is the value and debt of your/your spouse's investments, including real estate? DO NOT include the home you live in, the value of life insurance, or retirement plans.	\$	\$
What is the value and debt of your/your spouse's current business and/or investment farm? DO NOT include the value of your/your spouse's small business that has less than 100 employees or a family farm that you/your spouse live on and operate.	\$	\$

<u>PARENT(S) INCOME INFORMATION - Complete this section if you are considered DEPENDENT for financial aid purposes:</u>

Parents' Tax Filing Status (check one box only):

MY PARENT(s) HAVE FILED a 2021 federal income tax return (attached is a copy of a tax return
transcript). Contact the IRS at 1-800-908-9946 for a copy of your tax return transcript.

- ☐ MY PARENT(S) DID NOT WORK and are not required to file a 2021 federal tax return.
- ☐ MY PARENT(S) WORKED but did not file a 2021 federal income tax return.

Parents' income information - Include wages earned from work, business or investment income, pension disbursements, unemployment compensation and all other income sources.

TYPE OF INCOME	Received in 2021	Received in 2022	Estimated for 2023
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$

ADDITIONAL FINANCIAL INFORMATION

Other Income - Enter the total amounts for the year	Received in 2021	Received in 2022	Estimated for 2023
Child support PAID. Do not include support for children in your household.	\$	\$	\$
Taxable earnings from need-based employment programs such as Federal Work Study.	\$	\$	\$
Combat pay or special combat pay - only enter the amount that was taxable and included in your Adjusted Gross Income (AGI).	\$	\$	\$
Payments to tax-deferred pension and savings plans including, but not limited to, amounts reported the W-2 form in boxes 12a through 12d, codes D, E, F, G, H, and S.	\$	\$	\$
Child support RECEIVED for all children in the household. Don't include foster care or adoption payments.	\$	\$	\$
Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits). Don't include the value of on-basis military housing or the value of a basic military allowance for housing.	\$	\$	\$
Veterans non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and /or VA Educational Work-Study allowances.	\$	\$	\$
Other untaxed income not reported, such as worker's compensation, disability, etc. DO NOT include student aid, welfare (TANF) payments, untaxed Social Security benefits, SSI, combat pay, flexible spending arrangements.	\$	\$	\$
Money received, or paid on your behalf (e.g. bills), not reported elsewhere on this form.	\$	\$	\$

ASSET INFORMATION — Enter the value of any assets as of the day you filled out this form	Current Value	Current Debt
What is your parent(s) total current balance of cash, savings, and checking accounts?	\$	xxxxxxxxxx
What is the value and debt of your parent(s) investments, including real estate? DO NOT include the home they live in, the value of life insurance, or retirement plans.	\$	\$
What is the value and debt of your parent(s) current business and/or investment farm? DO NOT include the value of your parent(s) small business that has less than 100 employees or a family farm that your parent(s) live on and operate.	\$	\$

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STUDENT/SPOUSE INCOME	REPORTED ON	CALENDAR YEAR (Jan 1 - Dec 31)	FISCAL YEAR (July 1 – June 30)
ADJUSTED GROSS INCOME			
INCOME TAX			
STUDENT'S EARNINGS			
SPOUSE'S EARNINGS			
Estimated Additional Financial Information TYPE:			
Estimated Untaxed Income TYPE:			
PARENT(S) INCOME	REPORTED ON APPLICATION	CALENDAR YEAR (Jan 1 - Dec 31)	FISCAL YEAR (July 1 – June 30)
ADJUSTED GROSS INCOME			
INCOME TAX			
FATHER'S EARNINGS			
MOTHER'S EARNINGS			
Estimated Additional Financial Information TYPE:			
Estimated Untaxed Income TYPE:			

COMMENTS:				
☐ APPROVED FOR: ☐ Calendar ☐ Original EFC: DENIED: Reason for denial:	New EFC:	•	Yes	No
REVIEWED BY:				DATE: