



## 2021-2022 SPECIAL CIRCUMSTANCE REQUEST

Phone: (559) 494-3012 Fax: (800) 643-0932 Address: 995 N. Reed Ave. Email: reedley.financialaid@reedleycollege.edu

This form is to request an income adjustment to your 2021-2022 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
<ul style="list-style-type: none"> <li>✓ Student's current check stub (if employed)</li> <li>✓ Father's current check stub (if employed)</li> <li>✓ Mother's current check stub (if employed)</li> <li>✓ Current check stubs or statements for all untaxed benefits</li> <li>✓ Signed copies of parent's and student's 2019 taxreturn transcript, schedules, and all W-2's</li> <li>✓ Signed copies of parent's and student's 2020 taxreturn transcript, schedules, and all W-2's</li> <li>✓ Signed copies of parent's and student's 2021 taxreturn transcript, schedules, and all W-2's*</li> </ul> <p>*If you are completing this form after January 2022</p>	<ul style="list-style-type: none"> <li>✓ Student's current check stub (if employed)</li> <li>✓ Spouse's current check stub (if employed)</li> <li>✓ Current check stubs or statements for all untaxed benefits</li> <li>✓ Signed copies of student's and spouse's 2019 taxreturn transcript, schedules, and all W-2's</li> <li>✓ Signed copies of student's and spouse's 2020 taxreturn transcript, schedules, and all W-2's</li> <li>✓ Signed copies of student's and spouse's 2021 taxreturn transcript, schedules, and all W-2's*</li> </ul> <p>*If you are completing this form after January 2022</p>

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 REQUEST DURING 2021:	IF YOU ARE FILING THIS REQUEST DURING 2022:
<p><b><u>Loss of Employment:</u></b> Student/Spouse/Parent was working but is now unemployed or earning less income.</p>	<ul style="list-style-type: none"> <li>• Last pay check stub(s) from all previous jobs in 2021</li> <li>• Letter from previous employer(s) indicating last date of employment</li> <li>• Award notification letter or current print out from Employment Development Department (EDD) indicating amount of unemployment compensation paid, if applicable</li> </ul>	<ul style="list-style-type: none"> <li>• Last pay check stub(s) from all previous jobs in 2022</li> <li>• Letter from previous employer(s) indicating last date of employment</li> <li>• Award notification letter or current print out from Employment Development Department (EDD) indicating amount of unemployment compensation paid, if applicable</li> </ul>
<p><b><u>Loss of Benefit:</u></b> Student/Spouse/Parent has lost all or a portion of a cash benefit.</p>	<ul style="list-style-type: none"> <li>• Last pay check stub(s) or current print out of benefit(s) received in 2021</li> <li>• Letter from agency that provided benefit verifying when the benefit was terminated</li> </ul>	<ul style="list-style-type: none"> <li>• Last pay check stub(s) or current print out of benefit(s) received in 2022</li> <li>• Letter from agency that provided benefit verifying when the benefit was terminated</li> </ul>
<p><b><u>Deduction of a One-Time Payment:</u></b> 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.</p>	<ul style="list-style-type: none"> <li>• Documentation verifying the amount, purpose, and date of the payment</li> <li>• Receipt(s) and/or other documentation showing how payment was spent</li> <li>• Copies of two most recent bank statements for all bank accounts</li> </ul>	<ul style="list-style-type: none"> <li>• Documentation verifying the amount, purpose, and date of the payment</li> <li>• Receipt(s) and/or other documentation showing how payment was spent</li> <li>• Copies of two most recent bank statements for all bank accounts</li> </ul>
<p><b><u>Change in Marital Status:</u></b> Student/Parent is now married, separated or divorced</p>	<ul style="list-style-type: none"> <li>• Court documents verifying legal separation, divorce, or marriage</li> </ul>	<ul style="list-style-type: none"> <li>• Court documents verifying legal separation, divorce, or marriage</li> </ul>
<p><b><u>Death of Spouse or Parent:</u></b> Spouse/Parent passed away after the FAFSA was filed.</p>	<ul style="list-style-type: none"> <li>• Death Certificate</li> </ul>	<ul style="list-style-type: none"> <li>• Death Certificate</li> </ul>
<p><b><u>Unusual Expenses:</u></b> Student/Spouse/Parent incurred and paid for medical expenses not covered by insurance or private school tuition.</p>	<ul style="list-style-type: none"> <li>• Copies of original bill(s)</li> <li>• Copies of receipt(s) or document(s) verifying payment</li> </ul>	<ul style="list-style-type: none"> <li>• Copies of original bill(s)</li> <li>• Copies of receipt(s) or document(s) verifying payment</li> </ul>



# 2021-2022 SPECIAL CIRCUMSTANCE REQUEST

## **STUDENT INFORMATION:**

Name: \_\_\_\_\_

STUDENT ID #: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Phone Number: \_\_\_\_\_

## **EXPLANATION OF CIRCUMSTANCE (check all that apply):**

- Loss of employment
- Loss of benefit
- Deduction of one-time payment
- Change in Marital Status
- Death of spouse or parent
- Unusual expenses

Give specific dates and reasons as to when and why income changes occurred - be specific and list events in chronological order. If you need more space, attach a separate sheet of paper.

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## **VERIFICATION OF HOUSEHOLD SIZE:**

Write in the names of all household members. Also write in the name of the college attended for any household member (excluding parents) who will be attending college at least half-time between July 1, 2021 and June 30, 2022 and will be enrolled in a degree or certificate program. If you need more space, attach a separate sheet of paper.

### **Dependent Students:**

- Include yourself, your parent(s) (including stepparent) even if you don't live with your parents, and
- Your parent(s) dependent children, even if they don't live with your parents if your parents provide more than half of their support OR if they would be required to give parental information when filling out a FAFSA
- Other dependents ONLY IF they now live with your parent(s) AND your parents provide more than half of their support from 07/01/2021 to 06/30/2022.

### **Independent Students:**

- Include yourself and your spouse if you are legally married
- Your children if you provide more than half of their support from 07/01/2021 to 06/30/2022, and
- Other dependents ONLY IF they live with you and you will provide more than half of their support from 07/01/2021 to 06/30/2022.

Full Name	Age	Relationship to Student	Name of College

## **CERTIFICATION:**

I/We certify that all the information reported to qualify for federal aid is complete and correct to my/our knowledge. I/we understand that if additional documentation is required, I/we will submit those documents in a timely manner or my Special Circumstance Request will be denied. I/we also understand that if I/we give false or misleading information, I/we may be fined, jailed, or both.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature (required if student is dependent)

\_\_\_\_\_  
Date

## **STUDENT/SPOUSE INCOME INFORMATION**

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

- I/WE HAVE FILED a 2019 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 2019 federal tax return.
- I/WE WORKED but did not file a 2019 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

<b>Type of Income</b>	<b>Received in 2019</b>	<b>Received in 2020</b>	<b>Estimated for 2021</b>
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$

<b>Other Income - Enter the total amounts for the year</b>	<b>Received in 2019</b>	<b>Received in 2020</b>	<b>Estimated for 2021</b>
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). <b>Don't include</b> 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, flexiblespending arrangements.	\$	\$	\$
Money received, or paid on your behalf (e.g. bills), not reported elsewhere on this form.	\$	\$	\$

<b>Asset Information – Enter the value of any assets as of the day you filled out this form</b>	<b>Current Value</b>	<b>Current Debt</b>
What is your/your spouse's total current balance of cash, savings, and checking accounts?	\$	XXXXXXXXXXXX
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.	\$	\$

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

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

- MY PARENT(s) HAVE FILED a 2019 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 2019 federal tax return.
- MY PARENT(S) WORKED but did not file a 2019 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 2019	Received in 2020	Estimated for 2021
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$
	\$	\$	\$

**ADDITIONAL FINANCIAL INFORMATION**

Other Income - Enter the total amounts for the year	Received in 2019	Received in 2020	Estimated for 2021
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). <b>Don't include</b> 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, flexiblespending 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?	\$	XXXXXXXXXXXXXX
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.	\$	\$

## FOR OFFICE USE ONLY

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 Year       Fiscal Year

Original EFC: \_\_\_\_\_    New EFC: \_\_\_\_\_    Corrections Requested:    Yes    No

DENIED: Reason for denial: \_\_\_\_\_

REVIEWED BY: \_\_\_\_\_      DATE: \_\_\_\_\_