

STUDENT: _____

COM ID OR SSN: _____

REQUEST FOR ADJUSTMENT DUE TO SPECIAL CIRCUMSTANCES 2017-2018
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Requests will only be considered for reasons indicated below that caused spouse/parents' income be less in 2016 than it was in 2015. Requests **will not** be considered for voluntary (resignation) unemployment, reduction or cancellation of over-time pay, or a one-time lump sum compensation.

1. Check the appropriate reason and indicate the date of the change in your situation and submit documentation to verify circumstances.

REASON FOR CHANGE IN INCOMEA. Involuntary Unemployment (layoff or termination)

B. Divorce

C. Death of spouse or parent

D. Disability of student, spouse, parent

DATE OF CHANGE

_____/____/_____

_____/____/_____

_____/____/_____

_____/____/_____

2. Must attach a copy of your **2016 IRS Tax Return Transcript and all w2s.**

NO action will be taken on this request until all requested documentation has been received. Other information/documentation could be requested once the request has been submitted and is under review.

May attach a written explanation of circumstances for which you are requesting this adjustment to your financial aid application.

CERTIFICATION:

I certify that the information provided on this form and on all supporting documentation is true and correct. I understand that corrections to my FAFSA application will change my eligibility, but do not guarantee additional financial aid will be awarded.

Student Signature_____
Date_____
Spouse Signature (if applicable)_____
Date_____
Parent Signature (if applicable)_____
Date