

## **2024-2025 Special Circumstances Request**

Student Name:		ID#:	
Guidelines:			
nid for the 2024-2025 acaden eligibility for federal financial only consider reductions in i circumstances if you already l his makes you Pell Eligible. U	nic year. However, there are special circul l aid using Student, Spouse and Parent 20 income for the circumstances listed in S have an SAI (student aid index) of zero or	022 income is used to determine student eligibility of mstances under which we may be able to recalculate 123 income or adjusted 2024 income. The Financial Atep 2 of this form. It is our policy not to consider spless, or if your loss of income is less than 25% of you tural disaster, personal living (e.g. wedding expensems) are also not considered.	e student Aid Office will ecial AGI unless
Step 1: Request expla	anation in an attached typed a	and signed letter.	
Must include date of	of loss of income and subsequent employ	yment estimation.	
Step 2: Reason for the	e Request		
Typical Supportir	-	e, death, or separation of the parents. ers, verification from attorney, or divorce decre year tax return.	ee; death
Typical Supportir	-	s or termination. etterhead, indicating last day of employment, o x return and signed current year tax return.	date of final
Typical Supportir	-	, disability, injury or natural disaster. employment compensation, disability benefits turn.	s, SS benefits;
Typical Supportir		m prior year income is no longer available. ining source of nonrecurring income military by year tax return.	oonus, divorce,
Step 3: Submit Attache	d Household Verification and Sup	porting Tax Documents	
nformation will be perfori		ents and information is complete. Verification are any discrepancies found, regardless of whet rent financial aid awards.	-
vill provide the required of orm you may be referred	documents to verify the information.	g that all information on the form is correct ar If you purposely give false or misleading infor Id result in being fined, sent to prison or both. hat the request will be granted.	mation on this
Student Signature		Date Signed	_
Parent 1/Guardian 1/Spou	use Signature	Date Signed	_
Parent 2/Guardian 2/Spot		Date Signed	-



## **Household Verification**

Student Name:	ID#	<b>!:</b>

## Household Information as of Today If you are an Independent Student:

- List yourself (the Student) first.
- List your Spouse, if you are married. If your spouse will be attending college AND enrolled in a degree or certificate program at least half-time between July 1, 2023 and June 30, 2024 provide the name and state of the college.
- List your children if you will provide more than half of their support from July 1, 2023 through June 30, 2024.
- List other people only if they now live with you and get more than half of their support from you, and will continue to get this support from July 1, 2023 through June 30, 2024.
- For those listed below who will be attending a college AND enrolled in a degree or certificate program at least half-time between July 1, 2023 and June 30, 2024, provide the name and state of the college. Do not include dual enrollment for high school students.
- Attach a separate sheet if required.

## Household Information as of Today If you are a Dependent Student:

- List yourself (the Student) first.
- List your Parent(s)
  - o If your legal Parents are married to each other or are not married AND live together list both.
  - o If your legal Parent has married/remarried, list your legal Parent and your Stepparent.
  - o If your legal Parents are separated or divorced, list only the Parent whose information you provided on the FAFSA.
- List your Parent(s) other children if your Parent(s) will provide more than half of their support from July 1, 2023 through June 30, 2024.
- List other people only if they now live with your Parent(s) **AND** get more half of their support from your Parent(s) **AND** will continue to get support from July 1, 2023 through June 30, 2024.
- For those listed below who will be attending a college AND enrolled in a degree or certificate program at least half-time between July 1, 2023 and June 30, 2024, provide the name and state of the college. Do not include dual enrollment for high school students.
- ❖ Attach a separate sheet if required.

Full Name	Age	Relation to Student	Name and State of College
		SELF	

Certification and Signs	ature
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certify that all information reported on the	is form and	in my supporting d	locumentation is comp	lete and correct.
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Student's Signature:	Date:

3900 University Blvd., Tyler, TX 75799