

## 2021-2022 Special Condition Application

**Student Name :** \_\_\_\_\_ **Student ID:** \_\_\_\_\_

Federal Regulation for Financial Aid allows a Financial Aid Administrator limited authority to adjust the Free Application for Federal Student Aid (FAFSA) data elements when certain circumstances exist. A Special Condition is not the costs associated with lifestyle choices, consumer indebtedness (house payments, car expenses, living without roommates, credit card debt, etc.). Please note, bankruptcy cannot be used in the review of eligibility for financial aid. If you feel that your circumstances have changed significantly since you originally filed your 2021-2022 FAFSA, please review this form and follow the instructions.

**Your FAFSA and all verification documents must be submitted prior to filing a Special Condition Application.**

**Step 1: In the first column of the table below, check the appropriate circumstance, attach a signed statement explaining the details, and provide all necessary supporting documentation.**

| Special Condition  | For an Independent Student   | For a Dependent Student  | Required Documentation – All requests need a signed statement explaining situation.  |
|--|--|--|--|
| <input type="checkbox"/> <b>Loss of Employment</b>   | Your (and/or your spouse's) earned income in 2021 will be significantly less than it was reported on the FAFSA.            | Your parent(s) or your earned income in 2021 will be significantly less than it was reported on the FAFSA.         | *Last pay stub(s)<br>*Termination/resignation letter<br>*Unemployment summary<br>*Copy of severance package<br>*Documentation of year-to-date income<br>*2020 1040 and all schedules   |
| <input type="checkbox"/> <b>Loss of Income</b> <ul style="list-style-type: none"> <li>• Social Security</li> <li>• Child Support</li> <li>• Alimony</li> </ul>                                       | Your (and/or your spouse's) benefits in 2021 will be less than those reported on the FAFSA.                                | Your parent(s) or your benefits in 2021 will be less than those reported on the FAFSA.                             | *For Social Security: Documentation of total amount of 2020 benefits and date of termination or reduction with effective date and new monthly amounts if applicable<br>*For child support or alimony: Documentation of 2021 updated figures. |
| <input type="checkbox"/> <b>Marital separation or divorce AFTER 2021-2022 FAFSA has been filed</b>   | You and your spouse have divorced or separated AFTER filing the FAFSA.   | Your parents have divorced or separated AFTER filing the FAFSA.  | *Divorce decree or separation agreement that includes anticipated child support and/or alimony<br>*Proof of separate addresses for both parties (e.g. utility bill, lease agreement, etc.).<br>*2019 1040, all schedules, and W2s.           |
| <input type="checkbox"/> <b>Death of a parent or spouse</b>  | Your spouse has passed away.   | A parent whose information is on the FAFSA has passed away.  | Copy of Death Certificate  |
| <input type="checkbox"/> <b>Medical or dental expenses</b><br>To make adjustments in this area, you must document where you have paid out-of-pocket expenses in excess of the EFC formula allowance. | Your (and/or your spouse's) unreimbursed medical/dental expenses in 2019 exceeded 11% of your income protection allowance. | Parent(s) or student unreimbursed medical/dental expense in 2018 exceeded 11% of your income protection allowance. | *Documentation of PAYMENT(s) made in 2019 (not covered by insurance) medical/dental bills<br>*Schedule A (if filed) of the IRS 1040  |
| <input type="checkbox"/> <b>Parent in College</b>  | n/a  | A parent whose information is on the FAFSA is enrolled in college at least half time.                              | Copy of schedule and/or bill statement for parent.   |
| <input type="checkbox"/> <b>Change of Parent Information on FAFSA</b>  | n/a  | Written explanation why the student is changing the parental information.  | *Copy of parents' 2019 federal tax return and W2 forms<br>*FAFSA Step 4<br>*Verification Worksheet<br>*Signed certification page   |

**Step 2: Enter all untaxed income and benefits received for January 1, 2020, to December 31, 2020. Do Not Leave Blank**

| <b>Untaxed Income and Benefits for 2020</b>    | <b>Parent 1</b> | <b>Parent 2</b> | <b>Student</b> | <b>Spouse</b> |
|--|-----------------|-----------------|----------------|---------------|
| Retirement/Pensions Benefits                   | \$              | \$              | \$             | \$            |
| Child Support Received                         | \$              | \$              | \$             | \$            |
| Disability/Workers Compensation – exclude SSDI | \$              | \$              | \$             | \$            |
| Veterans Non-Education Benefits                | \$              | \$              | \$             | \$            |
| Payments to Retirement Accounts                | \$              | \$              | \$             | \$            |
| Other: ex. COLA                                | \$              | \$              | \$             | \$            |

**Step 3: Enter all taxable income received for January 1, 2020, to December 31, 2020. Do Not Leave Blank**

| <b>Taxed Income and Benefits for 2020</b>                 | <b>Parent 1</b> | <b>Parent 2</b> | <b>Student</b> | <b>Spouse</b> |
|---|-----------------|-----------------|----------------|---------------|
| Wages, Salaries, Tips (received 2019 year to date)        | \$              | \$              | \$             | \$            |
| Wages, Salaries, Tips (estimate for remaining 2020)       | \$              | \$              | \$             | \$            |
| Total Wages, Salaries, and Tips for 2020                  | \$              | \$              | \$             | \$            |
| Interest and Dividends (re. Native Corporation dividends) | \$              | \$              | \$             | \$            |
| Unemployment Benefits                                     | \$              | \$              | \$             | \$            |
| Pension/IRA Distribution                                  | \$              | \$              | \$             | \$            |
| Business/Farm Income                                      | \$              | \$              | \$             | \$            |
| Rental Income or Loss                                     | \$              | \$              | \$             | \$            |
| Other:  | \$              | \$              | \$             | \$            |

**Certification**

I certify that the above information and any additional information provided are true and correct to the best of my knowledge. I understand that this information will be used to determine my eligibility for federal and institutional student aid, and as such, carries the same penalties for misrepresentation and fraud as my Free Application for Federal Student Aid (FAFSA).

**Student Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Spouse Signature (if married):** \_\_\_\_\_ **Date:** \_\_\_\_\_

**Parent Signature:** \_\_\_\_\_ **Date:** \_\_\_\_\_

Please upload all documents using the Document Upload through your MySSU account. You may also mail your information to Shawnee State University, Financial Aid Office, 940 Second Street, Portsmouth Ohio, 45662 or fax to 740-351-3435. Please do not email any documents.