

Student Name: _____ SSN: _____

When completing The Free Application for Federal Student Aid (FAFSA) for the 2020 - 2021 academic year, a family is asked to provide actual 2018 taxable and non-taxable income. A family, who expects its 2020 income to be **considerably** less than was reported on the FAFSA for 2018, should complete the form below and submit it to the Westminster College Financial Aid Office along with a **letter of explanation and appropriate documentation that supports the special circumstance**. Please note: Special Circumstance Forms submitted without required supporting documentation and letters of explanation will not be considered. Submittal of a Special Circumstance Form does not guarantee that the student's financial aid will be adjusted.

Please include copies of your family's 2018 Federal Tax Return and W-2 forms and your family's 2019 Federal Tax Return and W-2 forms once completed.

Section A I am filing a Special Circumstance Form as a result of:

<p>Loss of employment</p> <p><input type="checkbox"/> Parent <input type="checkbox"/> Student <input type="checkbox"/> Spouse</p> <p>Last date of employment _____</p>	<p>Required documentation</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Letter of explanation from student/parent <input checked="" type="checkbox"/> Copy of last pay stub for each job held <input checked="" type="checkbox"/> Proof of unemployment compensation benefits <input checked="" type="checkbox"/> Report severance pay
<p>Substantial reduction in income from work. Note: Loss of overtime will not be considered</p> <p><input type="checkbox"/> Parent <input type="checkbox"/> Student <input type="checkbox"/> Spouse</p>	<p>Required documentation</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Letter of explanation from student/parent <input checked="" type="checkbox"/> Copy of most recent pay stub showing income
<p>Reduction in or loss of benefit (e.g. Unemployment, Worker's Comp., Disability, Child Support, TANF)</p> <p><input type="checkbox"/> Parent <input type="checkbox"/> Student <input type="checkbox"/> Spouse</p> <p>_____ Date</p>	<p>Required documentation</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Letter of explanation from student/parent <input checked="" type="checkbox"/> Notice of cancellation of benefits/income <input checked="" type="checkbox"/> Loss of child support explanation letter should include how many children in the household will continue to receive child support and the amount that will be received each month
<p>Death</p> <p><input type="checkbox"/> Parent <input type="checkbox"/> Spouse</p> <p>Date of death _____</p>	<p>Required documentation</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Letter of explanation from student/parent <input checked="" type="checkbox"/> Copy of death certificate
<p>Divorce/Separation</p> <p><input type="checkbox"/> Parent <input type="checkbox"/> Student</p> <p>_____ Date</p>	<p>Required documentation</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Letter of explanation from student/parent <input checked="" type="checkbox"/> List of current household members <input checked="" type="checkbox"/> Documentation of separate households (i.e.: copies of bank statements, driver's licenses, utility bills, leases, etc.) <input checked="" type="checkbox"/> Amount of child or spousal support received and when payments began or are expected to begin
<p>One time lump sum payment</p> <p>\$ _____</p>	<p>Required documentation</p> <ul style="list-style-type: none"> <input checked="" type="checkbox"/> Letter of explanation from student/parent <input checked="" type="checkbox"/> Documentation that identifies the source, amount and reason of the one-time income <input checked="" type="checkbox"/> Documentation supporting how the funds were spent or invested

Section B Please complete all applicable fields.

EXPECTED INCOME FROM JAN 1, 2020 UNTIL DEC 31, 2020

Income Source	Mother	Father	Student	Spouse
Income earned from work	\$	\$	\$	\$
Unemployment benefits	\$	\$	\$	\$
TANF and/or AFDC	\$	\$	\$	\$
Child support received	\$	\$	\$	\$
Veteran's benefits	\$	\$	\$	\$
Severance pay	\$	\$	\$	\$
Disability benefits	\$	\$	\$	\$
Other Income	\$	\$	\$	\$
Total 2020 income	\$	\$	\$	\$

Section C Certification requesting special circumstance consideration:

The information provided on this form and supporting documents is true and complete to the best of my knowledge. I agree to provide additional documentation, if requested*. I understand that if at any time the estimates of the 2020 income that I submit on this form change, I will contact the Financial Aid Office as soon as possible regarding the change. I understand that Special Circumstance Forms submitted without required supporting documentation and letters of explanation will not be considered. I also understand that submittal of a Special Circumstance Form does not guarantee that the financial aid will be adjusted. I further understand that I will be required to submit copies of the 2020 Federal Income Tax returns to Westminster College as final documentation of the special circumstance.

_____ **I have included copies of my family's 2018 Federal Tax Return and W-2 forms. (Required)**

_____ **I have included or will submit once completed, copies of my family's 2019 Federal Tax Return and W-2 forms. (Required)**

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Spouse Signature: _____ Date: _____

*During the review, we may find that we need additional documentation. Please provide information about the best way for us to contact you.

Please return this form with supporting documentation to:

**Westminster College, Financial Aid Office, 319 S. Market St.
New Wilmington, PA 16172-0001 Telephone: 724-946-7102 Fax: 724-946-6171 Email: finaid@westminster.edu**