



Request for Review of Special Circumstances 2009-2010

Student Name: _____ ID#: _____

Indicate type of Special Circumstance(s) and provide all required information and documentation.

ELEMENTARY AND SECONDARY EDUCATION EXPENSES

1. Do you pay high elementary or secondary education expenses at a private school? ___Yes ___No
2. Amount of elementary/secondary school expenses in 2008: \$_____
3. Amount of elementary/secondary school expenses in 2009 (estimate if ongoing): \$_____

Required Documentation:

- Statement(s) on school's stationery indicating the family member(s) who attended and the amount of tuition actually paid in **2008** and/or expected to be paid in **2009**.
- The statement must also be signed by the person(s) responsible for the expenses(s).
- Written explanation of why high education costs are necessary for the family.

EXTRAORDINARY DEPENDENT CARE EXPENSES

1. Do you pay unusually high dependent care expenses? ___Yes ___No
2. Amount of dependent care expenses in 2008: \$_____
3. Amount of dependent care expenses in 2009 (estimate if ongoing): \$_____

Required Documentation:

- Statement(s) from dependent care provider(s) of expenses paid in 2008 and/or expected to be paid in 2009.
- Written explanation of why unusually high dependent care costs are necessary for the family.

INCOME REDUCTION OR NON-RECURRING INCOME:

1. Did you/your family have unusual income in 2008 which will not recur in 2009? ___Yes ___No
2. What is the source and amount of the 2008 nonrecurring income? _____
3. Did you/your family have a significant reduction in income from 2008 to 2009? ___Yes ___No

4. What is the source affected by income reduction for 2009? _____
(Example: "Father's Income")
5. What is the amount expected from this source for 2009? _____

Required Documentation:

- Written explanation of why the income will not recur or has been reduced significantly.
- Supporting documentation to include proof of 2008 amounts, 2009 expected amounts, and third-party documentation of loss of job or other relevant event.

UNUSUAL MEDICAL AND DENTAL EXPENSES

1. How much did you pay for your medical/dental insurance in 2008? \$ _____
(Do not include employer's contribution.)
2. What 2008 medical/dental expenses were not covered by insurance? \$ _____
3. What 2008 medical/dental expenses were itemized on 2008 tax return? \$ _____
4. How much will you pay for your medical/dental insurance in 2009? \$ _____
5. What 2009 medical/dental expenses will not be covered by insurance? \$ _____

Required Documentation:

- Signed **2008** Tax Returns showing Medical/Dental itemization (if applicable)
- Pay Stubs or Canceled Checks to document payment for insurance coverage
- Documentation of unreimbursed/uncovered medical dental expenses for 2008 and/or 2009

ROTH I.R.A. CONVERSION

1. Do you or your parents have amounts from the conversion of a regular IRA to a Roth IRA on your 2008 tax return? ___Yes ___No
2. If yes, what was the amount of the Roth IRA on the 2008 tax return? \$ _____

Required Documentation:

- Signed **2008** Tax Return documenting Roth IRA amount

UNUSUAL CIRCUMSTANCE

1. As a dependent student according to FAFSA criteria, do you have unusual circumstances due to which a parent cannot complete the parental information portion of the FAFSA? ___Yes ___No

Note: A parent's unwillingness to provide the information is not sufficient cause to consider a dependency override, and self-sufficiency on the part of a student does not in and of itself provide cause for a dependency override.

2. Do you have any usual circumstances which may affect your eligibility for financial aid? ___Yes ___No

Required Documentation:

- Written statement describing the unusual circumstances indicated above.

