



Eastern WV Community and Technical College 2018-2019 Special Circumstance Request

Eastern WV Community and Technical College realizes families may experience unforeseen circumstances and/or expenses during an academic year. Use this form to address these unusual circumstances or expenses.

Student Name: _____ Student ID#: _____

Social Security #: _____ Date of Birth: _____

Email Address: _____ Telephone Number: _____

Individual(s) with circumstance(s), check as appropriate:

Father/Stepfather Mother/Stepmother Student Spouse

Special circumstance is being filed as a result of:

Check all circumstances that apply. Requests will NOT be processed without ALL required information.

<input type="checkbox"/> Loss of Employment (must be at least 10 weeks in Calendar Year 2017)	Required Information: 1. Letter of explanation of circumstances from student/parent 2. Last date of employment / / 3. Completed Section B on the reverse side of this form 4. Signed 2017 Federal Tax Return Transcript from the IRS 5. Copy of last paycheck stub, with year-to-date earnings
<input type="checkbox"/> Reduction or Loss of Income (Such as Unemployment Benefits, Workers Compensation, Child Support, Social Security Benefits, SSI, Untaxed Retirement Disability, Welfare, TANF, One Time Income, etcetera)	Required Information: 1. Letter of explanation of circumstances from student/parent 2. Last date of receipt of benefit/income / / 3. Completed Section B on the reverse side of this form 4. Signed 2017 Federal Tax Return Transcript from the IRS 5. Copy of last paycheck stub, with year-to-date earnings
<input type="checkbox"/> Separation/Divorce	Required Information: 1. Letter of explanation of circumstances from student/parent 2. Date of separation/divorce / / 3. Completed Section B on the reserve side of this form 4. Signed 2017 Federal Tax Return Transcript from the IRS 5. Completed 2018-2019 Verification Worksheet
<input type="checkbox"/> Death of Wage Earner	Required Information: 1. Date of death / / 2. Copy of death certificate 3. Completed Section B on the reserve side of this form 4. Signed 2017 Federal Tax Return Transcript from the IRS 5. Completed Verification Worksheet
<input type="checkbox"/> Other Catastrophic Situation (Such as medical expenses that were not reimbursed. Actual out of pocket payments must exceed 7.5% of adjusted gross income)	Required Information: 1. Submit a detailed letter explaining the situation and provide any necessary documentation 2. Completed Section B on the reserve side of this form 3. Signed 2017 Federal Tax Return Transcript from the IRS

INSTRUCTIONS: Complete using ALL expected income from January 1, 2018 to December 31, 2018 of the person(s) with the special circumstance(s). You must submit documentation of ALL expected income. If filing this form for separation or death of a parent, use only your custodial parent's income.

2018 Taxed Income	Father	Mother	Student	Spouse
Income Earned from Work	\$	\$	\$	\$
Unemployment Benefits	\$	\$	\$	\$
Business or Farm Income	\$	\$	\$	\$
Pensions & Annuities	\$	\$	\$	\$
Taxed Interest/Dividend Income	\$	\$	\$	\$
Taxed Social Security Benefits	\$	\$	\$	\$
Other Taxed Income (pensions, alimony, rentals, etc.)	\$	\$	\$	\$
Total 2018 Taxed Income	\$	\$	\$	\$

2018 Untaxed Income	Father	Mother	Student	Spouse
Child Support Received	\$	\$	\$	\$
Untaxed Social Security Benefits	\$	\$	\$	\$
Workers Compensation	\$	\$	\$	\$
Welfare Benefits/TANF	\$	\$	\$	\$
Untaxed Portions of Pensions	\$	\$	\$	\$
Veterans Non-Education Benefits	\$	\$	\$	\$
Tax-Deferred Pension Payments	\$	\$	\$	\$
Deductible IRA/Keogh Payments	\$	\$	\$	\$
Tax Exempt Interest Income	\$	\$	\$	\$
Foreign Income Exclusions	\$	\$	\$	\$
Living Allowance for Clergy/Members of the Military	\$	\$	\$	\$
Any Other Untaxed Income	\$	\$	\$	\$
Total 2018 Untaxed Income	\$	\$	\$	\$

By signing, I agree that the information provided is true and complete to the best of my knowledge. If requested, I agree to provide additional documentation. I further agree to notify the Eastern WV Community and Technical College Financial Aid Office of any error or omission in the above information, or of any further circumstances which affect the accuracy of the provided information. I understand failure to comply with this agreement could result in forfeiture of financial aid eligibility of the student.

Student's Signature

Date

Parent or Student's Spouse's Signature

Date

Eastern WV Community and Technical College 316 Eastern Drive, Moorefield, WV 26836

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