Jacksonville State University
Office of Student Financial Services

SPECIAL CIRCUMSTANCE FOR 2013-2014

Student’s Name: ___________________________ Student ID #: ___________________________

Last  First  MI

Address: ____________________________________________________________ Phone: __________________________

Street  City  State  Zip

This Special Circumstance form allows you to tell us of any unusual situation that you or your family faces in 2013. The information and documentation you provide will be reviewed in accordance with guidelines provided by the U.S. Department of Education. If there is any change in your financial aid eligibility, you will be notified.

Please complete this form and return it along with a summary and all requested supporting documentation. We will not process an incomplete form.

Deadline for submitting this form is February 1, 2014.

CHECK ALL CIRCUMSTANCES THAT MAY APPLY

__1. A parent earned money in 2012, but has lost his/her job. Which parent? ______ Date employment ceased: ____________
   Does this parent plan to return to work in 2013? __Yes____ No_____ Send a copy of the last year-to-date pay stubs from each 2013 employer and a summary explaining your circumstances, and how you came up with your estimates reported on the back of this page for your taxed and untaxed income from January 1 to December 31, 2013.

__2. A parent who earned money in 2012 has not been able to earn money in the usual way in 2013 due to a disability or natural disaster that has occurred in 2012 or 2013. Please explain:
   Provide a summary and supporting documentation.

__3. A parent received unemployment compensation or some untaxed income or benefit in 2012, but has lost that income for 2013. The untaxed income must be from a public or private agency, a company, or a person due to a court order. Type of income lost: __________________ Date of Loss: ____________
   Provide a summary and supporting documentation.

__4. After you filed the Free Application for Federal Student Aid (FAFSA), your parents separated or divorced. Date of separation or divorce: ____________
   Provide a copy of the divorce decree and a copy of your parents’ state tax return with W-2s for both parents.

__5. After you filed the FAFSA, a parent died.
   Provide a copy of the death certificate.

__6. Some circumstance other than those listed above will cause your 2013 income or your parent’s to be significantly less than in 2012.
   Please provide a summary explaining your circumstances, and how you came up with your estimates reported on the back of this page for your taxed and untaxed income from January 1 to December 31, 2013; along with supporting documentation such as: copy of last year-to-date pay stub from each 2013 employer, and any other paperwork verifying other circumstances you are reporting.

PLEASE COMPLETE THE REVERSE SIDE →
2013 ESTIMATED GROSS Income Earned from Work
(January 1st through December 31, 2013)

$ __________ $ __________
Father

Provide copies of your last 2013 year-to-date pay stub from each employer, a summary of how you came up with your estimates from January 1, 2013 to December 31, 2013; along with any supporting documentation to verify your changes in taxed and untaxed information in the calendar year of 2013.

$ __________
Mother

Other Income Sources for Calendar Year 2013

Unemployment Benefits $ __________ $ __________
Disability Benefits $ __________ $ __________
Social Security Benefits $ __________ # months $ __________
Child Support $ __________ # months $ __________
Welfare Benefits – including Temporary Assistance to Needy Families (TANF) $ __________ $ __________
Other untaxed income (Specify __________________________) $ __________
Other taxable income $ __________ $ __________

(Include expected interest, dividends, business income, alimony, pensions, capital gains, etc.)

TOTAL 2013 ESTIMATED INCOME (EARNED AND UNEARNED) $ __________ $ __________

STUDENT CERTIFICATION

I certify that all information provided on this form is true, accurate, and complete. I have attached statements and documents to this form as requested to support my claim of special circumstance. I further understand that the Office of Student Financial Aid reserves the right to request additional information not mentioned within this form.

______________________________ Date
Student’s Signature

______________________________ Date
Parent’s Signature

For Office Use Only

Approved Counselor __________ Date __________ 2013 AGI __________
Denied Reason __________ Date __________ 2013 Tax Pd __________
Delayed __________ Date __________ 2013 Untaxed __________
Original EFC __________ Spec Circ EFC __________
Reviewed by Committee __________

RETURN TO:
Jacksonville State University Office of Student Financial Services
107 Bibb Graves Hall, 700 Pelham Rd. N, Jacksonville, AL 36265
Phone: (256) 782-5006 Fax: (256) 782-5476 www.jsu.edu/finaid