## Defiance College Special Circumstance Application 2016-2017

Financial need is normally based on each student's or family's gross annual income from the previous tax year. If your income has recently decreased or you have an unforeseen financial hardship that was not taken into account on your Free Application for Federal Student Aid (FAFSA), we may be able to reevaluate your financial need based on your projected gross income for the 2016 tax-year (January 1, 2016-December 31, 2016). Please remember that not all special circumstance recalculations will result in additional financial aid and cannot be appealed to the U.S. Department of Education.

**Instructions:** For the rest of this form, if you are a dependent student, you must provide information for yourself and your parent(s). If you are an independent student, you must only provide information for yourself and your spouse (if married). Complete all sections that apply and attach required documentation.

Student Name:	Student ID:SSN:				
Address					
Student Email:	Parent Email:				
1) Chec	ck all situations that apply and submit documentation listed.				
•	mployment, reduced employment or job change				
	Last check stub(s) from previous employer				
	Letter from previous employer stating the date of termination				
	Benefit or denial letter of unemployment				
	Check stub of new employment or statement stating employment status				
	2015 W-2 forms and 2015 Federal Tax Transcripts				
b) Retire	ement				
	Last check stub(s) from employer				
	Letter from employer stating date of retirement				
	Letter from employer stating the retirement pension				
✓	2015 W-2 forms and 2015 Federal Tax Transcripts				
	aration or Divorce (since filing the FAFSA)				
	Court documentation verifying legal separation or divorce				
✓	A letter from the parent or student stating: 1) number of dependents living in the household, 2) child support received for the				
	dependent children 3) Total amount of assets (excluding the home)				
<b>✓</b>	2015 W-2 forms and 2015 Federal Tax Transcripts				
	h of a Parent or Spouse				
	Copy of the Death Certificate				
	Social Security Benefits received for all members of the household				
✓	2015 W-2 forms and 2015 Federal Tax Transcripts				
	uced or Terminated Untaxed Income				
	Last check stub or printout of benefit received in 2015				
✓	Letter from agency verifying date and year to date amount of benefits lost for 2015				
✓	2015 W-2 forms and 2015 Federal Tax Transcripts				
	ual Medical Expenses paid but not covered by insurance				
	Copy of the 2015 Federal Tax Return: including Schedule A				
	Receipts of Medical/Dental payments made in 2015 and 2016				
	Proof of expenses paid with no insurance coverage				
g) Othe					
✓	Documentation of loss of income				

Official documentation to support the loss of income

2) Briefly explain the circumstance in the box below (or on a separate attached letter)					
3) Financial Information					
Please list estimated income and benefits for Jar	uary 1 2016	Sto December 31 2016	Report total amounts for 2016		
DO NOT report monthly amounts.	uary 1, 2010	to December 51, 2010.	report total amounts for 2010.		
		Estimated 2015 Ar	nounts		
Mother's Income Earned from Work		\$			
Father's Income Earned from Work		\$			
Student's Income Earned from Work		\$			
Spouse's Income from Work (Independent Studer	its Only)	\$			
Taxed/Untaxed Pension/Annuities		\$			
Taxed/Untaxed Social Security	- a.	\$			
Unemployment/Worker's Compensation/Welfare	3enetits	\$			
Alimony/Spousal Support Received		\$			
Child Support Received		\$			
IRA/KEOGH Contributions Untaxed Interest Income		Φ			
Other (explain)		\$ \$			
Other (explain		Ψ			
A) Cianastanas					
4) Signatures	u · •				
To the best of my knowledge, all of the information		m is true and complete.	If asked by the Financial Aid Oπice,		
agree to provide additional documentation neces	sary.				
Student[	)ate	Parent	Date		
5) Return all required documentation	on by mail	or fax to:			

Defiance College, Financial Aid Office, 701 N. Clinton Street, Defiance, OH 43512
Fax: 419-783-2579 Email: financialaid@defiance.edu