Special Circumstances INDEPENDENT Student Appeal Instructions

Special Circumstance appeals are reviewed case by case starting July 1, 2020 through March 31, 2021.

Important Note: The instructions below apply to the student and/or spouse, if the student is married. Notify the financial aid office if the student or spouse filed separate IRS income tax returns in 2018 or had a change in marital status after December 31, 2018.

You may complete the Special Circumstances Appeal form if you are an independent student whose current financial situation is not accurately reflected by your 2018 tax information. Your 2018 income is used to assess your financial need for the 2020-2021 school year, in accordance with federal laws and regulations. If your income is lower due to special circumstances, a financial aid administrator may be able to use 2019 income or estimated year 2020 income to calculate financial need. Your appeal is complete only when you submit documentation that supports your circumstance to the Financial Aid Office. Your appeal will not be considered until all necessary documents have been submitted.

YOU ARE REQUIRED TO SUBMIT A DETAILED PERSONAL STATEMENT DESCRIBING YOUR CIRCUMSTANCE ALONG WITH YOUR DOCUMENTATION.

Select one category from the following list that most closely describes your special circumstance. Read the description carefully and attach all of the documentation requested under that category.

♦ Loss or reduction of employment

You and/or your spouse earned money in 2018 and had a reduction in hours (loss of overtime compensation will not be considered), or have lost employment for at least 10 weeks in 2019 or 2020 that has resulted in a reduction of wages. Ten (10) weeks must have passed prior to submission of this appeal for either circumstance. APPEALS SUBMITTED BEFORE TEN (10) WEEKS WILL NOT BE PROCESSED.

You must provide copies of all of the following:

- Written verification from the former employer(s) indicating start and end date of employment or reduction of hours, the amount of your, or your spouse’s, year-to-date gross earnings, severance pay, vacation, or retirement payout.
- A written statement from your, or your spouse’s, current or future employer(s) that indicates your, or your spouse’s, expected gross earning for the calendar year 2020.
- Include copies of your, or your spouse’s, two most recent pay stubs.
- Eligibility forms that indicate dates and amount of unemployment benefits.

♦ Separation, divorce, or death

If you have already completed your Free Application for Federal Student Aid (FAFSA) for the current academic year and since that time have become separated, divorced, or a spouse has died.

You must provide copies of all the following that apply to your circumstance(s):

- Legal separation papers or divorce decree.
- Death certificate.
- Updated ‘Number of Household Member and Number in College’ verification form.
- 2018 Signed Federal IRS Tax Return or Tax Return Transcript.
- 2018 W-2’s.
Loss of taxed/untaxed income or benefit

You and/or your spouse received unemployment compensation, other taxed or untaxed income, or a benefit in 2018, and have completely lost that compensation, income, or benefit for at least 10 weeks in the calendar year 2019 or 2020. Ten (10) weeks without compensation must have passed prior to your submission of this appeal. APPEALS SUBMITTED BEFORE 10 WEEKS WILL NOT BE ACCEPTED.

The untaxed income or benefit must be from a public or private agency, a company, or from a person due to court order. (Do not include loss of veterans benefits). Income and benefits include: Social Security Benefits, Supplemental Security Income (SSI), child support, untaxed retirement or disability benefits, welfare benefits, etc.

You must provide copies of all of the following:

- Contracts, agency notices, or legal papers that indicate the date you and/or your spouse’s taxed/untaxed income or benefit was terminated.
- What amount of income came from that source.
- How that income was used.

Loss of one-time income

You and/or your spouse received a one-time income in 2018 or 2019 that will not occur in 2019 or 2020 (e.g., rollover into a Roth IRA, moving expense allowance, past-year Social Security payments, or a divorce settlement). Special circumstance consideration will not be given if this one-time income is a result of an inheritance, job bonus or overtime compensation, gambling winnings, pension, capital gain, insurance settlements, or early distributions of retirement accounts.

You must provide copies of all of the following:

- Contracts, agency notices, or legal papers that indicate the date you and/or your spouse’s one-time income was terminated.
- What amount of income came from that source.
- How that income was used.

Unusual, unreimbursed, out of pocket medical care expenses

NOTE: Only expenses already paid directly by the student and/or spouse will be considered.

Unexpected/non-recurring out of pocket medical expenses—You and/or your spouse have paid out of pocket for unusual or unexpected nonrecurring medical expenses for a member of your household that are not reimbursed. Only those costs not covered by insurance or another agency may be considered. The payment of insurance premiums, regular health maintenance, and routine expenses such as eyeglasses, birth control prescriptions, and elective or cosmetic procedures (e.g., orthodontic braces) are not considered unusual medical expenses and will not be considered for the Special Circumstances Appeal.

You must provide copies of all of the following:

- Statement from a health care provider that documents the unusual condition.
- Receipts that demonstrate out of pocket payment of medical treatment for this condition.
INDEPENDENT STUDENTS

Read the Special Circumstances Appeal Instructions carefully before completing this form. Attach your personal statement and all required documentation. You must complete Sections 1, 2, & 3. The appeal will be for one year only. Please provide income information for 2019 and 2020.

**SECTION 1: Background**

<table>
<thead>
<tr>
<th>Student name (first, middle initial, last)</th>
<th>W#</th>
<th>Date</th>
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<tbody>
<tr>
<td>Address (Street or P.O. box, City, State, Zip-code)</td>
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</table>

**SECTION 2: Income source table**

<table>
<thead>
<tr>
<th>Income Source</th>
<th>Year 2019 Total Income</th>
<th>2020 Year-To-Date Income</th>
<th>Rest of 2020 year Income</th>
<th>2020 Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Income earned from work by student (Example: wages, salary, and tips)</td>
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<tr>
<td>2. Income earned from work by spouse (Example: wages, salary, and tips)</td>
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<td>3. Business, farm, or rental income</td>
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<td>4. Unemployment compensation</td>
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<td>5. Spousal maintenance</td>
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<td>6. Child support</td>
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<td>7. Welfare benefits (such as AFDC or TANF)</td>
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<td>8. Veterans benefits</td>
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<td>9. Social Security benefits (including SSI)</td>
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<td>10. Workman’s compensation</td>
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<td>11. Short-term or long-term disability benefits</td>
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<td>12. Severance pay</td>
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<td>13. Withdrawal from retirement account</td>
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<td>14. Other income (pension, annuity, rental income, housing allowance, bonuses)</td>
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**SECTION 3: Certification**

To the best of my knowledge, the information in this appeal is true. I understand that the misrepresentation of facts in connection with this appeal, whenever discovered, may be sufficient cause, in and of itself, for cancellation and repayment of financial aid. **Warning: If you use this form to establish eligibility for federal student financial aid and purposely give false or misleading information, you may be fined $20,000, sent to prison, or both.**

Student signature: Date:

Spouse signature: Date:

To be completed by WSU Financial Aid Office

**ACTION:** Denied Approved FAA Initials DATE

**COMMENTS:**