



Request for Review of Special Circumstances

2025-2026 Academic Year

Student's Name (please print): _____ Student ID: _____

Note: Each Special Circumstance Review is evaluated on an individual basis. You will be notified of the decision through your student email account.

Please check the categories that apply to your request. Provide all the required documentation (listed on the next page) based on the categories you have checked.

- ☐ A. Change in Employment Status from 2023
- ☐ B. Separation / Divorce
- ☐ C. Death of Spouse / Parent(s)
- ☐ D. Loss of Untaxed Income or Benefits
- ☐ E. Received One-Time Income in 2023
- ☐ F. Other Conditions / Changes in Income—provide a detailed explanation

Please include an explanation of the special circumstances that you and/or your spouse or parent(s) have that may affect your eligibility for financial aid. (Use the space below. Attach a separate sheet of paper, if necessary)

I (We) certify that the information/documentation given with this Request for Review of Special Circumstances is correct. If this application indicates adjustments can be made, I authorize the Office of Financial Aid and Veterans Services to make these changes electronically on my behalf.

WARNING: Any person who makes false statements or misrepresentations on this form may be subject to a fine or imprisonment or both, under provisions of the United States Criminal Code.

Student's Signature (Required)

Date

Parent's Signature (Required, if student is Dependent)

Date

Student's Name (please print): _____ Student ID: _____

This Special Circumstance applies to: <input type="checkbox"/> Student <input type="checkbox"/> Spouse <input type="checkbox"/> Parent(s)																							
Date Effective (mm/dd/yyyy): _____																							
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For Financial Aid Office Use Only
Comments:

Reviewed by: _____ Request is: Granted / Denied Date: _____