



2021-2022

# Change of Circumstance

Student Name: \_\_\_\_\_

Student ID# \_\_\_\_\_

The majority of financial assistance is based upon 2019 information provided on the FAFSA. We recognize that a family's income is not always consistent from one year to the next, and that circumstances beyond a family's control may inhibit a family's ability to contribute to educational expenses. We welcome the opportunity to discuss a substantial change in your family's status since filing the FAFSA. Changes resulting from this review do not guarantee an increase in your aid since a loss of income may have little or no effect on your financial aid eligibility.

**Please Note:** This form will not be processed until all documents have been submitted.

## Change of Circumstance

Please provide the following documentation indicated below as applicable. **Any unemployment period must have lasted at least 10 consecutive weeks.**

**Loss/Change of Income:** Unemployment, retirement, untaxed income, etc.

**Loss of Wage Earner:** Divorce, Separation, Disability, Death of Parent or Spouse, etc.

- Letter explaining situation. Include:
  - Dates associated with the job loss/change
  - Eligibility for unemployment, severance, retirement, social security or other income
- Proof of loss of income (e.g. letter from employer)
- Proof of previous salary (e.g. most recent paystub)
- Documentation of unemployment, severance, retirement, social security or other income
- Signed copy of 2020 Federal Tax Return
- Copy of 2020 W2s

- Letter explaining situation. Include:
  - Dates associated with loss of wage earner
  - Eligibility for alimony or child support
  - Eligibility for social security or other income
- Documentation of loss (e.g. divorce decree or death certificate)
- Documentation of alimony, child support, social security, or other income
- Signed copy of 2020 Federal Tax Return
- Copy of 2020 W2s

## Certification and Signature

Each person signing below certifies that all the information provided is complete and correct. The student and one parent whose information was reported on the FAFSA must sign ad date.

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Parent Signature (if dependent)*

\_\_\_\_\_  
*Date*