



Office of Financial Aid
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**Special
 Circumstances
 2014-15 School Year**

Student Name: _____ Student ID: _____

Parent/Stepparent Name: _____

Spouse Name: _____ Student / Parent Phone Number: _____

The Free Applications for Federal Student Aid (FAFSA) is designed to provide a snapshot of a family’s income and assets to determine their ability to contribute to the educational costs of their student. For some applicants, this snapshot does not reflect their current financial situation, due to some extenuating or special family circumstances. By using the Special Circumstance Form, a Student Financial Aid Advisor can evaluate individual circumstances to help create a more appropriate financial aid award package. The FAFSA information will be verified prior to making any adjustments.

Your Special Circumstance request cannot be reviewed until all required documentation has been received and you have completed the FAFSA. **Review and processing of this information will take approximately four weeks** from the date this completed form and all supporting documentation are received by our office. You will then be notified through your ATC campus email when the review has been completed. **During high volume times, our office is unable to process special circumstance request. The blackout periods for 2014-15 are:**

Fall Semester: August 2 – September 3
Spring Semester: December 15 – January 20

STEP ONE: Documentation – All students MUST submit the following documentation, regardless of their reason for filing this request. Failure to submit required documentation will delay processing. If you have already submitted these forms to our office, they do not need to be submitted again.

- Letter documenting the special circumstance
- Student 2013 Federal Tax Return Transcript & W2 form(s) or IRS Non-Filer Statement and Income Report
- For Dependent Students :
 - Dependent Verification Worksheet
 - Parent(s) 2013 Federal Tax Return Transcript & W2 form(s) or IRS Non-Filer Statement and Income Report
- For Independent Students:
 - Independent Verification Worksheet
 - Spouse 2013 Federal Tax Return Transcript & W2 form(s) or IRS Non-Filer Statement and Income Report

STEP TWO: Reasons for Filing – Check the box for circumstance(s) that apply to you and submit the additional documentation as indicated for that circumstance(s).

Special Circumstance Type	Documentation Needs
<input type="checkbox"/> LOSS OF EMPLOYMENT, REDUCED WAGES Parent / student / spouse wages in 2014 will be less than in 2013 due to loss of job, change in employment, reduction in hours, or reduction in pay. <input type="checkbox"/> Parent 1 <input type="checkbox"/> Parent 2 <input type="checkbox"/> Spouse <i>Note: Loss of employment will not be reviewed until 2 months have passed since last date of employment. Loss of overtime and bonuses will not be considered.</i>	<ul style="list-style-type: none"> • Last check stub(s) from previous employer. • Letter from previous employer stating last date of employment. • Benefit letter from unemployment. • Severance information, if applicable.
<input type="checkbox"/> LOSS OF BENEFITS (Child support, unemployment, etc.) after the FAFSA was filed. Benefit lost: _____ Amount: \$ _____	<ul style="list-style-type: none"> • Letter from agency verifying date and amount of benefit(s) lost.

<input type="checkbox"/>	<p>MARITAL SEPARATION / DIVORCE after the FAFSA was filed.</p> <p>Date of divorce or separation: _____</p> <p>Name of Custodial Parent: _____</p>	<ul style="list-style-type: none"> • Documentation of separation, divorce or verification of separate residences. • Documentation of child support, family support or maintenance support. Include support that is received or anticipated.
<input type="checkbox"/>	<p>ONE-TIME INCOME</p> <p>One-time nonrecurring income (such as inheritance, retirement, IRA distribution, etc) reported on the 2014-15 FAFSA that is no longer available.</p> <p><input type="checkbox"/> Parent 1 <input type="checkbox"/> Parent 2 <input type="checkbox"/> Spouse</p>	<ul style="list-style-type: none"> • Provide documentation of one-time income. • Signed statement identifying the source of income and how funds were spent or invested.
<input type="checkbox"/>	<p>DEATH OF PARENT / SPOUSE after the FAFSA was filed.</p> <p><input type="checkbox"/> Parent 1 <input type="checkbox"/> Parent 2 <input type="checkbox"/> Spouse</p> <p>Date of death: _____</p>	<ul style="list-style-type: none"> • Legal documentation of death.
<input type="checkbox"/>	<p>UNUSUAL MEDICAL AND DENTAL EXPENSES</p> <p>Eligible expenses are limited to medical and dental expenses paid and not reimbursed through insurance or employer-sponsored cafeteria plans. Expenses must be at least 7.5% of the Adjusted Gross Income (AGI) to meet the minimum threshold.</p>	<ul style="list-style-type: none"> • Documentation of paid expenses not covered by insurance or another party.
<input type="checkbox"/>	<p>FILING STATUS</p> <p>You disagree with the definition of an Independent Student, as outlined by the U.S. Department of Education, as it applies to you.</p> <p><i>Note: Living independently and not receiving monetary assistance from your parent(s) does not classify you as an Independent Student. Parents refuse to contribute to the student's education and/or unwilling to provide information on the FAFSA (or for verification) singly or in combination, does not qualify.</i></p>	<ul style="list-style-type: none"> • Signed statement describing how you are independent of your parents and your housing arrangement while in school and during breaks. • Three signed personal statements from individuals not related to you (clergy, governmental agency, school official, etc) stating their personal knowledge of you being independent.
<input type="checkbox"/>	<p>OTHER UNUSUAL EXPENSES</p>	<ul style="list-style-type: none"> • Provide documentation of expense.

STEP THREE: Certification Statement

I certify that the information on this form is complete and correct to the best of my knowledge. If additional documentation is required, I will submit such documentation or my Special Circumstance Request will be denied. I also understand that if I give false or misleading information, I may be fined, jailed, or both. I also understand that this information will be used in accordance with Federal guidelines and may or may not result in adjustments to the student's financial aid eligibility.

Student Signature: _____

Date: _____

Parent Signature: _____

Date: _____

Spouse Signature: _____

Date: _____

For Office use only

Ready for Review: _____

Review 1: _____

Approved Denied

Final decision: _____

Review 2: _____

Approved Denied