Luther College

2019-2020 Dependent Student Special Circumstance Form

Student's Name: ______________________________________      Luther ID: _____________________

Parent Name(s):  _______________________________________________________________________

Parent(s) daytime phone number:  ________________________________________________________

Parent(s) email address:  ________________________________________________________________

This form should be completed when a family can document a significant change in financial circumstances, or if you believe there are special circumstances that were not included/considered on your initial aid application. You will be notified by email regarding the outcome of your appeal after your information is reviewed by the Luther College Financial Aid Office.

The completion of this form does not guarantee an adjustment to a student’s financial aid award.

Please answer the following questions. Attach an additional page if more space is needed.

Part A. Submit the following:

1. A written statement explaining what caused the change(s) in your family’s circumstances
2. A signed copy of your most recent federal tax return (Page 1 & 2 and, if applicable, Schedules A, C, E and/or F) and W-2 Form(s)
3. Documentation of your change in circumstance(s). See next page for a list of required documents for specific circumstances

Part B. Check ALL that apply to you:

☐ Loss of employment or change of employment status for student or parent(s)
☐ One-time payment reflected on 2017 taxes that created an unusual increase in income
☐ Divorce or separation after filing the 2019-20 FAFSA
☐ Death of parent
☐ Loss of Untaxed Income (child support, pension, etc.)
☐ Unusually high medical/dental expenses not covered by insurance or pre-tax medical savings/spending account
☐ Private elementary or secondary school tuition for sibling
☐ Education Loan Payments made by parents for themselves
☐ Incorrect financial information provided on initial application
☐ Other:   __________________________________________________________________

Part C. Carefully read the following before signing this form:

I/we understand that submission/review of this form does not guarantee a change in the student’s financial aid eligibility. It is the student’s responsibility to remain in good standing with the Financial Services and Registrar’s offices. I/we affirm that the information provided in my appeal and the attached documentation is accurate and complete to the best of my/our knowledge. I/we understand that if any of the information used in my appeal changes, I must contact the Financial Aid Office immediately in writing with the corrected information. I/we understand that future financial aid awards may be reduced if income estimates are significantly underestimated in my appeal. I understand that false statements or misrepresentations may be cause for denial, reduction, withdrawal or repayment of financial aid.

_________________________________________  __________________________
Parent signature                     Date      Student signature                     Date

(Continue on back)
ACCEPTABLE DOCUMENTATION FOR PART A:

1. Loss of employment, or change in employment status
   □ Signed statement from the parent explaining reason(s) for unemployment
   □ Year-to-date pay stubs showing all income earned from work for 2018
   □ Documentation of all untaxed income received in 2018
   □ Termination letter and/or any documentation regarding severance pay
   □ Documentation of any unemployment benefits, disability benefits, retirement benefits, or insurance payments being received or expected to be received

2. Divorce or separation
   □ Divorce: Copy of divorce decree (include custody and child support agreements)
   □ Separation: Copy of legal separation document (include custody and child support agreements); or, if legal separation document is not yet available, a signed statement from your attorney or unrelated third party showing the date of separation
   □ Parent most recent W2’s if taxes were filed jointly

3. Death of parent
   □ Copy of death certificate or an obituary notice
   □ Documentation of proceeds of estate distributions including: inheritance, insurance, pensions and Social Security benefits that you have received or expect to receive

4. Loss of untaxed income
   □ Court documentation stating the last date of child support received
   □ Letter from the agency providing the benefits, detailing termination of benefits
   □ Statement from the agency that summarizes the amounts of the benefits already received

5. Unusual medical or dental expenses not covered by insurance or a health care flexible spending account
   (As a general rule, these expenses would need to exceed $3,000 before they would have the potential to impact a financial aid award.)
   □ Copy of Schedule A from federal tax return
   □ If the Schedule A is not available or the expense was paid in the current year, other documentation must be provided. This could include: bills, insurance statements, canceled checks, or other proof of the amounts paid by the family. In addition to this documentation, you must include your total expenses paid in your written statement.
   □ Copy of parent(s) most recent paystub

6. Private elementary or secondary school tuition
   □ Copy of billing statement from the school, including all financial aid and scholarships received

7. Educational Loan Payments
   □ Copy of current bill showing minimum monthly payment due on all federal loans held by either parent or for private student loans held or co-signed by either parent on behalf of other children

8. Other documentation/circumstances
   □ Any relevant documentation which will support request for reconsideration. If you need clarification on what to provide, please contact the Financial Aid Office.