



Financial Aid Office
 2121 Euclid Avenue, Cleveland, OH 44115
 Phone: (216) 687-5411 Fax: (216) 687-9247
 For in-person inquiries, please visit Campus411All-in-1, MC 116
<http://www.csuohio.edu/financial-aid/financial-aid>

2014-2015 Special Circumstance Petition

_____	_____	_____
Last Name	First Name	CSU ID Number
_____	(____) _____	(____) _____
Email Address	Phone Number (home)	Phone Number (cell)

*****This petition should only be completed by independent student/spouse or parent(s) of dependent student*****

Instructions:

- Attach a detailed explanation of your situation with documentation.
- Submit 2013 Federal Tax Transcripts for Student and Parent(s) *(if dependent)*
- Complete and submit the appropriate 2014-2015 Verification Worksheet (www.csuohio.edu/financial-aid/financial-aid-forms).

Additional information or documentation may be requested by the Financial Aid Office. If filing this petition after December 31, 2014-you MUST submit your 2014 Federal Tax Return Transcript.

One-time Income Payment: You or your parent/spouse received a one-time income payment in 2013 (May include pension or IRA distribution, inheritance or bonus).

Required documentation:

- 1) Documentation of one-time payment
- 2) Explanation of why one-time payment is not available for educational purposes

Consumer debt cannot be considered when determining a family's ability to contribute to a student's education

Loss of Untaxed/Taxable income: Child Support, Alimony, Workers Compensation or list other.
 List Benefit OR Untaxable/Taxable source: _____

Date of Benefit or Income Loss: _____ Amount received for 2013 \$ _____

Required Documentation:
Termination letter from provider/agency

Separation/Divorce:

Required Documentation:

- 1) Separation or divorce papers
- 2) All 2013 W-2s for both parties

Death (parent or spouse)

Name of Deceased _____

Relationship to student _____

Required Documentation:

- 1) Copy of the death certificate
- 2) 2013 W-2s of deceased if a joint federal tax return was filed.

Private School Tuition

Elementary/Secondary private school tuition: \$ _____ per year

Name of child/children: _____

Required Documentation:
A statement on school letterhead, indicating the amount paid/to be paid and for whom for 2014.

Student's Name _____

CSU ID Number _____

Medical/Dental Expenses: *You or your parents/spouse out of pocket expenses in 2013 exceeded 10% of the adjusted gross income.*

Required Documentation:

- 1) Copy of Schedule A from 2013 Federal Tax Return and/ or,
- 2) Statement of medical expenses from medical provider, not covered by insurance company

Loss of Employment (check one) __Mother__Father__Student__ Spouse (For independent student/spouse or parent of dependent student). Date of Loss: _____

Required Documentation: *Must be out of work at least 10 weeks before appeal will be considered*

- 1) Last paystub showing year to date earnings or letter from employer indicating year to date earnings
- 2) Unemployment Benefits Determination Statement

Other: Attach a brief statement and supporting documentation.

Certification:

I affirm that the data contained on this form and submitted with this form is true and complete to the best of my knowledge. Upon request, I will provide additional documentation to substantiate the information provided. If this Special Circumstance Petition involves a reduction of my earned income, I understand I may be required to provide documentation from the Internal Revenue Service of the actual income for the affected tax year.

Student's Signature

Date

Parent's Signature
(If circumstances refer to parental situation)

Date

For Office Use Only

APPROVED

DENIED

Old EFC: _____

New EFC: _____

New AGI: _____

New Taxes Paid: _____

New student income: _____

New spouse income: _____

New father income: _____

New mother income: _____

New additional Information: _____

New untaxed income: _____

Current ISIR Trans #: _____

New ISIR Trans # _____

If denied explain:

FAO Staff: _____

Date: _____