

### 2026-2027 Special Circumstance Petition

_____	_____	_____
Last Name	First Name	CSU ID #

**\*\*\*It is strongly recommended that you meet with a Student Services Specialist in Campus 411 All-in-1 to review your circumstances and supporting documentation.\*\*\***

This petition should only be completed by an independent student/spouse or parent(s) of a dependent student. Students need to have verification completed, and be awarded before consideration. **2026-2027 petitions will be considered after May 1<sup>st</sup>, 2026.**

**The following documents must be submitted with this form before your petition will be reviewed. Do not submit your petition until you have all required documents.**

**Checklist:**

- Detailed explanation of your situation – include dates when applicable
- The appropriate 2026-2027 Verification Worksheet ([www.csuohio.edu/financial-aid/financial-aid-forms](http://www.csuohio.edu/financial-aid/financial-aid-forms)).
- 2024 signed copy of your 1040 (Include Schedules 1, 2, 3, C, and K-1 if applicable), or IRS Tax Return Transcript(s) for Student and Spouse (if married) or Student and Parent(s) (if dependent), and a copy of All 2024 W-2s issued to Student, Spouse (if married), and Parent(s) (if dependent). This is NOT required if the IRS Direct Data Exchange (DDX) was used successfully on the 2026-2027 FAFSA.
- All additional required documentation listed for your circumstance.

**Additional information or documentation may be requested by the Financial Aid Office.**

*If this petition is filed after December 31, 2026 you **MUST** submit your 2026 Federal Tax Return and W2s*

- One-time Income Payment: You or your parent/spouse received a one-time income payment in 2024 (May include pension or IRA distribution, inheritance, or bonus).

**Additional 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: Alimony, Workers Compensation, Unemployment, or other.

List Benefit OR Untaxable/Taxable source: \_\_\_\_\_

Date of Benefit or Income Loss: \_\_\_\_\_ Amount received for 2024 \$ \_\_\_\_\_

**Additional required documentation:**

- Record of amount received from 1/1/2024 to present**
- Termination letter from provider/agency**

- Separation/Divorce:

**Additional required documentation:**

- 1) Separation or divorce documentation**
- 2) All 2024 W-2s for both parties**

- Death (parent or spouse)

Name of Deceased: \_\_\_\_\_

Relationship to student: \_\_\_\_\_

**Additional required documentation:**

- 1) Copy of the death certificate**
- 2) All 2024 W-2s for both parties and a Joint 2024 signed copy of 1040, or Federal Tax Return Transcript**

Medical /Dental Expenses: *Out of pocket expenses in 2024 exceeded 10% of the adjusted gross income.*

**Additional required documentation:**

**1) Copy of Schedule A from 2024 Federal Tax Return**

Loss of Employment ***Must be out of work at least 10 weeks before appeal will be considered***

(check one) \_\_Parent-1 \_\_Parent-2 \_\_Student \_\_Spouse (For independent student/spouse or parent of dependent student). Date of Loss: \_\_\_\_\_

**Additional required documentation:**

**Update income to 2025:**

**1) All 2025 W-2(s) issued**

**2) 2025 signed copy of your 1040 (Include Schedules 1, 2, 3, C, or K-1 if applicable), or IRS Tax Return Transcript**

**Update income to 2026:** *If this petition is filed after December 31, 2026 you MUST submit your 2026 Federal Tax Return and W2s.*

**1) A letter on letterhead from previous employer indicating last day worked**

**2) Last paystub showing year to date earnings or letter from employer indicating year to date earnings**

**3) Unemployment Benefits Determination Statement and payment summary**

Other: Attach a brief statement and supporting documentation.

### **Certification and Signatures**

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 impacted tax year.

**\*Note: This form must be signed with a hand written signature. Typed names or electronic signatures are not acceptable and will delay processing\***

\_\_\_\_\_  
\*Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
\*Parent's Signature (If Dependent Student)

\_\_\_\_\_  
Date

### **For Office Use Only**

Old SAI: \_\_\_\_\_

Parent income: \_\_\_\_\_

New SAI: \_\_\_\_\_

Parent's Spouse income: \_\_\_\_\_

New AGI: \_\_\_\_\_

New additional Information: \_\_\_\_\_

New Taxes Paid: \_\_\_\_\_

New untaxed income: \_\_\_\_\_

New student income: \_\_\_\_\_

Current ISIR Trans #: \_\_\_\_\_

New spouse income: \_\_\_\_\_

New ISIR Trans #: \_\_\_\_\_

**APPROVED**

**DENIED**

**WAIVED**

**NOT NEEDED**

Notes: \_\_\_\_\_

FAO Staff: \_\_\_\_\_

Date: \_\_\_\_\_