

## 2022-2023 Special Circumstance Petition

_____	_____	_____
Last Name	First Name	CSU ID #
_____	(____)_____	(____)_____
Email Address	Phone Number (Home)	Phone Number (Cell)

**\*\*\*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. **2022-2023 petitions will be considered after May 1<sup>st</sup>, 2022.**

**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 2022-2023 Verification Worksheet ([www.csuohio.edu/financial-aid/financial-aid-forms](http://www.csuohio.edu/financial-aid/financial-aid-forms)).
- 2020 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), this must be submitted even if the IRS Data Retrieval Tool was used.
- All 2020 W-2s issued to Student, Spouse (if married), and Parent(s) (if dependent).
- 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, 2022 you MUST submit your 2022 Federal Tax Return and W2s*

- One-time Income Payment: You or your parent/spouse received a one-time income payment in 2019 (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 2020 \$ \_\_\_\_\_

**Additional required documentation:**

- Record of amount received from 1/1/2020 to present
- Termination letter from provider/agency

- Separation/Divorce:

**Additional required documentation:**

- 1) Separation or divorce papers
- 2) All 2020 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 2020 W-2s for both parties on a Joint 2020 signed copy of 1040, or Federal Tax Return Transcript

Medical /Dental Expenses: *Out of pocket expenses in 2020 exceeded 10% of the adjusted gross income.*

**Additional required documentation:**

**1) Copy of Schedule A from 2020 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:**

**If loss occurred during 2021**

1) All 2021 W-2(s) issued

2) 2021 signed copy of your 1040 (Include Schedules 1, 2, 3, C, or K-1 if applicable), or IRS Tax Return Transcript

**If loss occurred during 2022:** *If this petition is filed after December 31, 2022 you MUST submit your 2022 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 physical signature. Typed names or electronic signatures are not acceptable and will delay processing\***

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

\_\_\_\_\_  
Date

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

\_\_\_\_\_  
Date

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**For Office Use Only**

Old EFC: \_\_\_\_\_

New Parent-1 income: \_\_\_\_\_

New EFC: \_\_\_\_\_

New Parent-2 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: \_\_\_\_\_