



2018-19 Special Condition Application

Student Name _____ ETBU Student ID _____

This form may be used for the 2018-19 school year if your family experienced a change in financial circumstances that lowered your family's income for 2018. **You may be eligible for a recalculation of your aid eligibility due to job or benefit loss, income reduction, separation/divorce, death, illness, or disability.**

All applicants must first complete the 2018-19 Free Application for Federal Student Aid (FAFSA). You and/or your spouse/parents must then provide documentation of your financial change. This information is used to determine if your financial aid award will be adjusted.

Instructions and Supporting Documentation:

Check the box below to indicate the circumstance(s) you would like us to consider. Along with this cover sheet, please submit a letter explaining the circumstance(s) you would like us to consider, as well as the supporting documentation that is listed under each situation you select. Our office must receive your 2018-19 FAFSA or TASFA before we can review your request.

- Loss of Employment**
(e.g. loss of a job or reduction in hours/wages)
 - Letter explaining the situation you would like us to consider
 - Last check stub(s) from previous employer(s) or explanation of benefits letter from a state unemployment agency
 - Letter from previous employer(s) confirming date of termination
 - An estimate of 2018 income from all sources, including unemployment insurance and severance OR a copy of the IRS 2017 Tax Return Transcript (if 2017 income is expected to be similar to 2018 income)

- Loss of Benefits**
(e.g. loss/reduction of child support, taxable Social Security, military benefits, etc.)
 - Letter explaining the situation you would like us to consider
 - Last check stub(s) or printout of the benefit(s) received
 - Letter from agency verifying date(s) and amount(s) of benefits lost; for child support, a copy of the divorce decree/court order

- Deduction of One-Time Payment**
(e.g. pension/annuity/RA distribution, gambling winnings, settlement, etc.)
 - Letter explaining the situation you would like us to consider
 - Receipt(s) and/or statements showing amount of the one-time payment and where one-time payment was spent
 - Copy of bank account statements
 - Estimate of 2018 income OR a copy of the IRS 2017 Tax Return Transcript (if 2017 income is expected to be similar to 2018 income)

- Death of a Spouse or Parent after the FAFSA was filed**
 - Letter explaining the situation you would like us to consider
 - Copy of death certificate
 - Estimate of 2018 income for surviving spouse OR copy of the IRS 2017 Tax Return Transcript (if 2017 income is expected to be similar to 2018 income)

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Date: _____ Received By: _____ Processed By: _____ Code: SPECIAL CONDITION

Separation or Divorce after the FAFSA was filed

- Letter explaining the situation you would like us to consider
- Court documentation verifying legal separation or divorce
- Estimate of 2018 income for custodial parent/independent student OR a copy of the custodial parent's/student's IRS 2017 Tax Return Transcripts (if 2017 income is expected to be similar to 2018 income)

Extraordinary Medical Expenses NOT covered by insurance

*Note that we cannot consider **unpaid** medical expenses/bills as part of a request for this category*

- Letter explaining the situation you would like us to consider
- Copy of medical bills and receipts/proof of payment

CERTIFICATION: All of the information on this form is true and complete to the best of my knowledge. If asked by an authorized official, I agree to give proof of the information that I have given on this form. I realize that this proof may include a copy of my U.S. income tax return. I also realize if I do not give proof when asked, the student may not be processed for financial aid.

Student signature: _____

Date: _____

Parent/Spouse signature: _____

Date: _____

Return this form and any attachments to:

Office of Financial Aid – East Texas Baptist University | One Tiger Drive, Marshall, TX 75670 | Phone: 903-923-2138

Email: financialaid@etbu.edu | Fax: 903-934-8120

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