



2021-22 Special Condition Application

Student Name _____ ETBU Student ID _____

This form may be used for the 2021-22 school year if your family experienced a change in financial circumstances that lowered your family's income for 2021. **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 2021-22 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 2021-22 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 2021 income from all sources, including unemployment insurance and severance OR a copy of the IRS 2020 Tax Return Transcript (if 2020 income is expected to be similar to 2021 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 statement(s) showing amount of the one-time payment and where one-time payment was spent
 - Copy of bank account statements
 - Estimate of 2021 income OR a copy of the IRS 2020 Tax Return Transcript (if 2019 income is expected to be similar to 2021 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 2021 income for surviving spouse OR copy of the IRS 2020 Tax Return Transcript (if 2019 income is expected to be similar to 2021 income)

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 2021 income for custodial parent/independent student OR a copy of the custodial parent's/student's IRS 2020 Tax Return Transcripts (if 2020 income is expected to be similar to 2021 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: _____