

Student Name:

## Return this form to:

Mail: One-Stop Student Services 2901 University Ave Stop 7155 Memorial Union Room 302 Grand Forks, ND 58202-7155 Electronic: UND Secure File Drop

Student ID:

## 2024-25 Special Circumstance Request – Independent

Submi	tting an appeal does not guarantee an adjustment will be made to your financial aid package.				
Special consideration may be available if your current financial situation is not accurately reflected by the 2022 tax information reported on your FAFSA. You must submit a signed detailed letter explaining the situation and all required documentation as outlined below. All documents must be completed and received before the Special Circumstance Committee will review the request. <b>Please use black or blue ink.</b>					
Ched	cklist for ALL appeals:  Student (and spouse) 2023 Federal Tax Return (signed) and Schedules 1-3 (if applicable)  Copy of Student (and spouse) 2023 W2s  Signed letter detailing circumstance Student (and spouse) most recent paystub(s)				
	On A: Criteria for Consideration Check all circumstances you would like to be considered and submit required intation. The documentation listed below is not an inclusive list. Additional information may be requested on a case-by-case basis.				
	Death of spouse				
	Name of Deceased:Date of death:/				
	<ul> <li>Copy of Death Certificate or Obituary</li> <li>Copy of student's 2022 Federal Tax Return (signed) and Schedules 1-3 (if applicable)</li> <li>Copy of student's 2022 W2s</li> </ul>				
	Student's divorce/separation				
	Date of divorce/separation://				
	Number in student's family: (include yourself, any dependent children, and other people living with you)				
	Copy of Divorce Decree or letter from attorney OR proof of separate residences				
	<ul> <li>utility bills, mortgage statements, rental agreement etc.</li> <li>Copy of student(s) 2022 Federal Tax Return (signed) and Schedules 1-3 (if applicable)</li> </ul>				
	<ul> <li>Copy of student(s) 2022 Federal Tax Return (signed) and Schedules 1-3 (if applicable)</li> <li>Copy of student(s) 2022 W2's</li> </ul>				
	Student (or spouse) is retired, unemployed for at least 8 weeks, or has a change in employment resulting in an income reduction				
	Relationship: Date:/				
	<ul> <li>Unemployment Documentation (if applicable)</li> <li>Documentation of situation</li> </ul>				
	Loss of benefits, such as unemployment, disability, social security, veterans, child support, or alimony				
	Relationship: Date:/				
	Documentation of situation				
	Non-recurring payments received during the FAFSA tax year will not be repeated				
	Type of Income: Date:/				
	Documentation of situation				

## **Section B: Income**

Complete the Gross Taxed Income and the Untaxed Income sections below for your family's expected income prior to exemptions, adjustments, or deductions. Include all estimated income <u>from January 1, 2024 to December 31, 2024</u>.

Please include estimates for the full year.

If none, enter zero.

<u>Tc</u>	otal 2024 Gross Taxed Incom	Student Income	Spouse Income				
1.	Wages, salaries, tips, severance	e pay	\$	\$			
2.	Business or farm income (self-e	employment)	\$	\$			
3.	IRA distributions, pensions, and	d annuities	\$	\$			
4.	Alimony		\$	\$			
5.	Unemployment Compensation		\$	\$			
6.	Other taxed income (specify) _		<u> </u>	\$			
To	otal 2024 Gross Taxed Incom	ne	\$	\$			
Total 2024 Untaxed Income							
<ol> <li>2.</li> </ol>	IRA deductions and payments to SIMPLE, and other qualified plate 1040 Schedule 1, total of Untaxed portion of IRA distributions.	ans lines 16 + 20	\$ \$	\$ \$			
3.	<ul> <li>1040 line 4a minus 4b</li> <li>Untaxed portion of pensions an</li> </ul>	d annuities	\$	\$			
4.	<ul> <li>1040 line 5a minus 5b</li> <li>Foreign earned income exclusion</li> <li>1040 Schedule 1, Line 8c</li> </ul>		\$	\$			
Section C: Signature							
I hereby certify that all information contained in this request is true and complete to the best of my knowledge. I understand that all special circumstances are reviewed on a case-by-case basis and the submission/review of this form does not guarantee a change in the student's financial aid eligibility.							
Stı	udent Signature	Date	Spouse Signature	Date			
ΕI	Electronic signatures will not be accepted.						