



Student Name _____ Student ID _____

Mailing Address _____ City _____ State ____ Zip _____

Phone _____ Alternate/Message Phone _____

This request is used when the income reported on the 2023-2024 FAFSA is greater than the expected income for 2022, due to a change in financial circumstances beyond the student’s control. This does not include personal choice situations. ***(Personal choices, while they may be well intended, do not constitute extenuating circumstances for which the student has no control.)***

Step 1 – ALL STUDENTS MUST SUBMIT THE FOLLOWING DOCUMENTATION

- Attach a detailed signed statement explaining your change in income, including dates.**
- Must attach a signed tax return AND all W2’s and/or Wage & Earnings statement.**

YOUR REQUEST WILL NOT BE REVIEWED WITHOUT DOCUMENTATION

Step 2 – CIRCUMSTANCES TO BE CONSIDERED (Check One)

| | | |
|---|--|--|
| <input type="checkbox"/> Loss of Employment | <input type="checkbox"/> Loss of Benefits | <input type="checkbox"/> Death of Parent (dependent students only) |
| <input type="checkbox"/> Unusual Expenses | <input type="checkbox"/> Deduction of a One-Time Payment | <input type="checkbox"/> Other (List and provide documentation) _____ |

Step 3 – IN ADDITION TO THE ABOVE, THE FOLLOWING DOCUMENTATION IS REQUIRED

| | |
|---|--|
| <p>LOSS OF EMPLOYMENT – Student/Parent was working during 2021, but is now working fewer hours or is unemployed. ⇒ Verification of 2022 Unemployment benefits being received ⇒ Filed tax return for 2022 or last pay stub for 2022 ⇒ Spouse’s financial information for 2022 if filed taxes separately</p> | <p>LOSS OF BENEFITS – (i.e. Child Support or Social Security) Student/Parent has lost some or all benefits. ⇒ Last check stub(s) or printout of benefit(s) received ⇒ Letter from agency verifying date and amount of benefit(s) lost</p> |
| <p>DEDUCTION OF ONE-TIME PAYMENT – Student/Parent received a ONE-TIME PAYMENT (Pension, IRA, Annuities, Gambling Winning, Settlement, Capital Gains, etc.) Copy of 1099R ⇒ Letter explaining the nature of the one-time payment ⇒ Explanation of how one-time payment was spent</p> | <p>DEATH OF A PARENT – Parent passed away after the FAFSA was filed. ⇒ Documentation of death (Death Certificate)</p> |
| <p>ADDITIONAL/UNUSUAL EXPENSES – Student/Parent has unusual medical/dental expenses not covered by insurance, Dependent/Elder Care expenses, and family paying private elementary/secondary school tuition or parent in college. ⇒ Copy of paid receipts for elementary/secondary tuition, dependent care, etc. ⇒ Detailed breakdown of paid receipts for elder care, medical, etc.</p> <p>NOTE: Medical/dental expenses up to 11% of the family’s income are taken into account by the federal needs analysis formula when determining financial aid eligibility. Therefore, only the portion of expenses which exceed 11% will be considered an unusual circumstance.</p> | |

By signing below, I declare under penalty of perjury that the above information is true and correct. I also understand that if I give false or misleading information, I may be fined up to \$20,000, sent to prison, or both.

Student Signature _____ Date _____

Spouse/Parent Signature _____ Date _____



UMPQUA
Community College

Umpqua Community College
Financial Aid Office
PO Box 967
Roseburg, Oregon 97470
541.440.4602 | 541.440.4612 (FAX)
FinancialAid@umpqua.edu

2023-2024
Special Circumstances Request
(Using 2022 Income)

FINANCIAL AID OFFICE USE ONLY

Action Taken: Granted Not Granted

Reason/Rationale: _____

Financial Aid Administrator Signature _____ Date _____