



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

2021-2022
Special Circumstances Request
(Using 2020 Income)

Student Name _____ Student ID _____

Mailing Address _____ City _____ State _____ Zip _____

Phone _____ Alternate/Message Phone _____

This request is used when the income reported on the 2021-2022 FAFSA is greater than the expected income for 2020, 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) _____

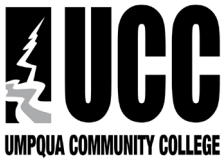
Step 3 – IN ADDITION TO THE ABOVE, THE FOLLOWING DOCUMENTATION IS REQUIRED

<p>LOSS OF EMPLOYMENT – Student/Parent was working during 2019 or 2020, but is now working fewer hours or is unemployed. ⇒ Verification of 2020 Unemployment benefits being received ⇒ Filed tax return for 2020 or last pay stub for 2020 ⇒ Spouse’s financial information for 2020 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 <u>1099R</u> ⇒ 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 certify 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 _____



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FINANCIAL AID OFFICE USE ONLY

Action Taken: Granted Not Granted

Reason/Rationale: _____

Financial Aid Administrator Signature _____ Date _____