

Name _____ ID _____

Email: _____ Phone _____

DEPENDENT STUDENT
2008-2009 PETITION FOR CONSIDERATION OF SPECIAL CIRCUMSTANCES
RESULTING IN REDUCED INCOME

PARENT'S LOSS OF EMPLOYMENT:

One of the student's parents (or a stepparent) worked fulltime in 2007, but has lost his/her job for at least 10 weeks in 2008.

Parent's effective date of unemployment: _____

PARENT'S LOSS OF EARNINGS DUE TO DISABILITY OR NATURAL DISASTER OCCURRING IN 2007 OR 2008:

One of the student's parents (or stepparent) worked fulltime in 2007 but has not been able to earn money in his/her usual way for at least 10 weeks in 2008. This must have been because of either a disability or a natural disaster that happened in 2007 or 2008.

Effective date of disability or natural disaster: _____

PARENT'S LOSS OF UNTAXED INCOME OR BENEFIT:

One of the student's parents (or stepparent) received unemployment compensation or some untaxed income or benefit in 2007 but has completely lost that income or benefit for at least 10 weeks in 2008. The untaxed income must be from a public or private agency, from a company, or from a person because of a court order.

Type of untaxed income lost: _____

Effective date of loss of untaxed income or benefit: _____

PARENT'S SEPARATION OR DIVORCE:

The student has already applied for Federal student aid for the current year and included income information for both parents, but his/her parents have legally separated or divorced since that time.

separated divorced *Effective date:* _____

DEATH OF PARENT:

The student has already applied for Federal financial aid for the 2008-2009 school year, but since that time one of the student's parents (or stepparent) for whom income information was previously reported has died.

OTHER: (DOCUMENTATION MUST BE PROVIDED)

Your family has tuition expenses at an elementary or secondary school.

Total expenses = _____

Your family has unusual medical or dental expenses not covered by insurance.

Total expenses = _____

You have unusual family circumstances not covered in this form that would affect your eligibility for student financial aid.

EXPECTED 2008 FAMILY INCOME

Documentation of earnings from work received to date for 2008 and documentation of expected earnings if available should be submitted to provide documented support of income estimates. Documentation of benefits received or to be received, such as disability, unemployment, etc., must be submitted.

	FATHER	MOTHER	STUDENT
<u>2008 EXPECTED Taxable income:</u>			
2008 total number of exemptions	_____	_____	_____
2008 Adjusted Gross income	\$ _____	\$ _____	\$ _____
2008 Unemployment Benefits	\$ _____	\$ _____	\$ _____
2008 Income earned from work	\$ _____	\$ _____	\$ _____
Earned Income Credit & Additional Child tax credit from 2007 tax return	\$ _____	\$ _____	

2008 EXPECTED Untaxed income & benefits:
(Use ANNUAL TOTALS ONLY)

Annual Social Security benefits	\$ _____	\$ _____	\$ _____
Annual AFDC/TANF	\$ _____	\$ _____	
Annual Child support received for all children	\$ _____	\$ _____	
Workers Comp/Disability Benefits	\$ _____	\$ _____	\$ _____

Describe all other sources of untaxed income and benefits

_____	\$ _____	\$ _____	\$ _____
_____	\$ _____	\$ _____	\$ _____

I certify that the information provided on this form is true and correct to the best of my knowledge. I understand that this information will be used to determine my (my son or daughter's) eligibility for financial aid and that false or misleading information may cause for termination of financial aid and repayment of funds received.

Student's Signature _____ Date _____

Parent's Signature _____ Date _____

