

## Request for Special Consideration 2018-2019

### STUDENT AND/OR SPOUSE

Please Note: You must file a 2018-2019 Free Application for Federal Student Aid (FAFSA) and receive a financial aid award offer before submitting this form.

STUDENT'S NAME: \_\_\_\_\_ DMACC ID \_\_\_\_\_

ADDRESS: \_\_\_\_\_ CITY: \_\_\_\_\_ STATE: \_\_\_\_\_ ZIP: \_\_\_\_\_

The Request for Special Consideration form is used if you and/or your spouse have special circumstances, which have resulted in a reduction in resources for **calendar year 2017** and will affect your ability to contribute toward your educational expenses.

The office will only consider reductions in income for special circumstances. It is DMACC policy **not to consider** a reduction in income for the following:

- Voluntarily leaving employment or reducing hours.
- Tuition paid for elementary/secondary private school.
- Unusual expenses related to personal living (e.g. wedding expenses, credit card bills, home mortgage or school loan payments, car payments, legal expenses, other miscellaneous consumer item expenses).
- One year bonus incomes such as lottery or gambling winnings.
- Reductions in overtime pay (this will be reflected on the following year's aid applications).
- Medical expenses other than those claimed as a deduction on your 2016 or 2017 federal tax returns.

If the reason you are requesting a Special Consideration review is listed above, do not complete this form. If you are requesting a review due to change in income that occurred during 2018, do not complete this form. Involuntary reductions in income that occur in 2018 may be considered under and Special Consideration for students completing the 2019-2020 FAFSA.

To determine if any adjustments can be made to your financial aid file, please explain your special condition on the back of this form. For your convenience, we have provided examples of common special conditions.

- ✓ You and/or your spouse has lost employment because of termination, layoff, disability, retirement, company closing, plant shutdown. **You must provide documentation of your last date of employment** if you or your spouse were involuntarily removed from your position at work.
- ✓ You and/or your spouse has been subject to an involuntary reduction in hours at work (examples include being moved from full-time to part-time employment due to job downsizing. Loss of overtime hours will not be considered).
- ✓ You and/or your spouse has lost some type of untaxed income or benefits that was reported on your 2018-2019 FAFSA. Untaxed income includes worker's compensation, child support, pensions and annuities, and taxable social security benefits.
- ✓ Since you completed the 2018-2019 FAFSA, you have divorced or separated from your spouse. If you have divorced or separated **you must provide documentation with the date of separation/divorce.**
- ✓ Your spouse is now deceased, but his/her information was reported on the FAFSA. If your spouse is deceased, **you must provide documentation with the date deceased.**
- ✓ You/your spouse incurred excessive medical expenses in 2016 due to the illness of a family member. **These expenses must be documented on your 2016 federal income tax return Schedule A.**

Please explain your special circumstance in the space provided below. When outlining your special circumstance, please remember that sometimes it's important to outline why a circumstance occurred in addition to what occurred. For example, if you are no longer employed outline why this is the case. If your hours were reduced at work, explain why:

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**Please provide documentation of your income for the entire calendar year 2017. If you have completed your 2017 Federal Tax Return, please provide a signed copy. If you have filed an extension, please provide a copy of your extension, all 2017 W-2's, and documentation of any other benefits received in 2017. If you are self-employed, you can provide a statement of wages earned in 2017 in lieu of a W-2.**

The documentation listed below is **required** in order to consider a special circumstance. The Financial Aid Office may require additional documentation/information beyond the examples below. If you do not submit documentation or leave sections of this form blank, the form will be returned to you as incomplete.

**Required documentation (if applicable to your circumstance):**

- Signed Copy of 2017 Federal Tax Return
- 2016 or 2017 Schedule A (for medical expenses)
- Letter from employer or doctor
- Copy of claimants unemployment record
- Notice of benefits determination (i.e. severance)
- Copy of disability award
- W-2 forms
- Military Separation Documents (DD-214)

Student's Signature \_\_\_\_\_ Date \_\_\_\_\_