

**SPECIAL CIRCUMSTANCE REQUEST FOR STUDENTS FOR 2023-2024**

**Student Name**

**NCCC Student ID**

The federal government realizes that sometimes families experience changes in circumstance since the completion of the FAFSA. This can include, but is not limited to, a change in marital status, reduction or loss of income, and reduction or loss of benefit.

This form allows **students** to request a change in the **student** data reported on the FAFSA based upon changes in student circumstances since the FAFSA completion date. If the student is married, spouse changes can be requested as well. Students can only request changes that remain in effect during the 2023 calendar year: between January 1, 2023 through December 31, 2023.

If this Special Circumstance is approved, the Financial Aid Office will update the FAFSA with the new data. Depending upon the magnitude of the change, this may or may not impact financial aid programs.

**STUDENT INSTRUCTIONS**

1. Complete **Section A** if the student change in circumstance is based upon one of the following:
  - **Reduction or loss of income** since the FAFSA completion date (ex. retirement, unemployment, job change, bankruptcy, illness, death in family, etc.)
  - **Reduction or loss of benefits** since the FAFSA completion date (ex. benefit loss or reduction due to child support, unemployment, alimony, retirements, disability, etc.)
2. Complete **Section B** if the student or spouse change in circumstance is based upon any other reason.

**SECTION A: STUDENT OR SPOUSE CHANGE IN INCOME, OR BENEFIT**

1. Check the reason for the request and report the date of the change:

**Reason**

- Reduction or loss of Income
- Reduction or loss of benefit

**Date of Change**

\_\_\_\_\_

\_\_\_\_\_

2. In order to update the FAFSA, we need to project student income (and spouse income if married) for the 2023 calendar year based upon the new circumstances. In the table below, report the parent wages earned from work before today and the expected or estimated wages for the remainder of the year. For example, if a job change has occurred, report parent wages earned as of today and then estimate any unemployment compensation or additional wages that are expected to be earned until December 31, 2023.

Leave no spaces blank, enter zeros when appropriate.

**Wages from Work in 2023:**

	<b>Student</b>	<b>Spouse if Married</b>
Wages earned from: January 1, 2023 to Today	\$	\$
Wages expected or estimated from: Today to December 31, 2023	\$	\$

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**Student Name****NCCC Student ID**

3. In order to update the FAFSA, we also need to estimate any other parent taxable income and parent nontaxable income for the 2023 calendar year. In the tables below, report the amounts for each item for the entire 2023 calendar year: January 1, 2023 to December 31, 2023. This includes any actual amounts received so far this year plus any estimated amounts for the remainder of the calendar year. For example, the parent would report the total of all alimony payments received to date this year plus the estimated alimony payments that are expected to be received for the remainder of the year.

Leave no spaces blank, **enter zeros** when appropriate.

**Other Taxable Income in 2023:**

	<b>Student</b>	<b>Spouse if Married</b>
Alimony	\$	\$
Business or Farm Income	\$	\$
IRA Distributions	\$	\$
Pensions and Annuities	\$	\$
Unemployment Compensation	\$	\$
Taxable Social Security Benefits	\$	\$
Other (Rentals, royalties, etc.)	\$	\$

**Non-Taxable Income in 2023:**

	<b>Student</b>	<b>Spouse if Married</b>
Welfare benefits, including TANF (exclude food stamps)	\$	\$
Tax deferred pension and savings payments	\$	\$
Child support received for all children	\$	\$
Untaxed portions of IRA distributions (exclude rollovers)	\$	\$
Untaxed portions of pensions (exclude rollovers)	\$	\$
Living allowances for clergy, military and others	\$	\$
Veterans non-education benefits	\$	\$
Other untaxed income (worker's comp., disability, etc.)	\$	\$
Money received or paid on your behalf (bills, gifts, etc.)	\$	\$

4. Attach the following documentation with your request:

- Detailed letter of explanation including relevant dates (date of change in marital status, loss of job, etc.), and source of any loss of income or benefit. Includes copies of any death certificate.
- Copies of last 2023 pay stub(s) as of today for each job held for all parents in household.
- An IRS Federal Tax Return Transcript for 2020 for all parents in the household or signed copies of 2021 Federal Tax Returns. Tax Return Transcripts can be ordered at [www.irs.gov](http://www.irs.gov) or by calling 1-800- 908-9946.
- 2021 W-2 statements for all in the household.

5. Authorize and Sign: The information provided on this form is true and complete to the best of my knowledge. I agree to notify the Financial Aid Office at NCCC of any error, omission, or of any further circumstances that may affect the accuracy of the above provided information. I understand that failure to comply with this agreement could result in the forfeiture of financial aid eligibility for the student.

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**Student Ink Signature****Date****Parent Ink Signature****Date**

Student Name \_\_\_\_\_ NCCC Student ID \_\_\_\_\_

**SECTION B: CHANGE IN CIRCUMSTANCE FOR ANY OTHER REASON**

Complete this section (Section B) if the parent change in circumstance is based upon any other reason.

**1. Attach the following documentation with your request:**

- A detailed letter of explanation of the situation and appropriate supporting documentation. The Financial Aid office may request additional documentation after reviewing this request.
- Copies of paid receipts or cancelled checks showing expenses incurred (not bills).
- An IRS Federal Tax Return Transcript for 2021 for all in the household or signed copies of the 2021 Federal Tax Returns. Tax Return Transcripts can be ordered at [www.irs.gov](http://www.irs.gov) or by calling 1-800-908-9946.
- 2021 W-2 statements for all in household.

**2. Authorize and Sign:**

By signing below, I certify that the information submitted with this Special Circumstance is true and complete to the best of my knowledge. I agree to notify the Financial Aid Office at NCCC of any error, omission, or of any further circumstances that may affect the accuracy provided information. I understand that failure to comply with this agreement could result in the forfeiture of financial aid eligibility for the student.

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Student Ink Signature

Date

Parent Ink Signature

Date