



## 2020-21 Special Circumstance Request (Parent)

Student Name

SSU I.D.

**Before submitting this form to the Financial Aid Office, you must have completed the 2020-21 Free Application for Federal Student Aid (FAFSA) or California Dream Application (CDA) with SSU’s school code of 001156.** This request gives us information on special circumstances that may result in an adjustment to your Expected Family Contribution (EFC) as currently reflected on the 2020-21 FAFSA or CDA. Further documentation may be required.

**Section 1: Write the name of parent(s) listed on the FAFSA/CDA (check parent(s) who had a loss of income).**

Parent 1 Name: \_\_\_\_\_

Parent 2 Name: \_\_\_\_\_

**Section 2: Check the tax year that the loss of income occurred and provide documents.** If married, both parents in Section 1 must provide income documentation.

- 2019 Tax Year
- Detailed explanation of special circumstance & its affect on your ability to pay for education expenses
  - 2019 IRS Tax Return Transcript
  - All 2019 W-2s
  - Income statements (i.e. EDD, Social Security, Retirement, Child Support, 1099s, etc.)

- 2020 Tax Year Effective Date: \_\_\_\_\_
- Detailed explanation of special circumstance & its affect on your ability to pay for education expenses
  - Most recent pay stub(s) with year-to-date earnings
  - Income statements (i.e. EDD, Social Security, Retirement, Child Support, 1099s, etc.)
  - If submitting Loss of Income after Jan. 1, 2021, a 2020 IRS Tax Return Transcript may be required

**Section 3: Indicate reason(s) for the loss of income and attach documentation.**

- Loss of employment in 2020:** Provide a letter from the former employer on letterhead, including last day employed.
- Copies of all taxed & untaxed income received in 2020. (Please note: it is SSU policy to evaluate your special circumstance 6 months after loss of employment).
- Reduction of work hours in 2020:** Provide a letter from the former employer on letterhead with effective date & hours worked per week. Copies of all taxed and untaxed income received in 2020.
- Divorce or Marital Separation:** Provide copies of dissolution of marriage, documentation of separation, etc.
- Death of Spouse:** Provide copy of death certificate.
- Loss of Taxed/Untaxed Benefits received in 2018:** Provide letter from agency verifying ending of benefit, indicating name of recipient.
- One-time Non-recurring Income:** Detailed explanation of special circumstance & its affect on your ability to pay for education expenses.
- Other:** \_\_\_\_\_

**Statement of Certification:** I certify that all information reported on this form and all attached documentation are true, complete, and accurate. I understand that submission of this appeal does not guarantee approval, nor does it guarantee any changes in the original financial aid award offer.

\_\_\_\_\_  
 Parent Name (please print)

\_\_\_\_\_  
 Phone number

\_\_\_\_\_  
 Parent Signature

\_\_\_\_\_  
 Date