



Special Circumstance Application Form

Sometimes families experience special circumstances that affect their ability to pay for college but are not reflected on their Free Application for Federal Student Aid (FAFSA). Federal regulations allow financial aid administrators to make professional judgment decisions for students with special or unusual circumstances.

The Financial Aid Office requires this application along with certain documents be provided to support you and your spouse's or you and your parent(s) (if applicable) claims of special circumstance. The Financial Aid Office will evaluate your application along with your supporting documents and FAFSA information to determine if you are eligible for any financial aid adjustment for the 2019-20 award year.

To be considered for a Special Circumstance, complete this form and submit all required documentation to: Office of Financial Aid, Eureka College, 300 E. College Avenue, Eureka, IL 61530; Or Fax documents to: 309-467-6897; OR scan and e-mail to tcrothers@eureka.edu.

Student's name: _____

Student's Eureka ID # (if known): _____

Student's address: _____

(Please print)

Your Special Circumstance will be reviewed once we have received this form with section 1, 2 and 3 completed.

ALL required supporting documentation must be submitted in order for your circumstance to be considered.

NOTE: Your 2019-20 FAFSA (Free Application for Federal Student Aid) must be completed. Any FAFSA corrections OR verification information, if any, must be completed in order for your special circumstance to be considered. *(Please keep in mind you are to use 2017 tax information when completing or correcting your 2019-20 FAFSA even if you are submitting a special circumstance request.)*

Section 1 - REQUIRED

Submit the following three in addition to the specified documents for your circumstance listed in section 2:

1. **2017 & 2018 Federal Tax Return Transcript** - Copies of student and parent (if applicable) 2017 & 2018 Federal Tax Return Transcripts. Transcripts may be obtained from the IRS online at www.irs.gov.
2. **EC Verification Worksheet** - Form located at <https://www.eureka.edu/future-students/financial-aid/financial-aid-resources/>
3. **2017 & 2018 W2 forms** - Copies of student and parent (if applicable) 2017 & 2018 W2 forms.

Section 2 - EXPLANATION OF SPECIAL CIRCUMSTANCE

Select only the circumstance(s) for which you wish to be reviewed and submit required documentation for the circumstance:

Medical/Dental Expenses: If the total amount of unreimbursed medical/dental expenses paid out in 2018 by your family was over an average of \$700 per family member. Required document for this circumstance: one of the following:
 1. Schedule A (Itemized Deductions form), as filed with a 2018 U.S. Form 1040, or
 2. Proof of payment made by the student and family for 2018 medical and dental expenses not covered by insurance.
Important: Do not include tax-exempt insurance premiums or expenses paid by medical savings through payroll deduction. These have already been excluded from income.

Private Elementary/Secondary School Tuition: If parents paid private elementary or secondary school tuition for family members other than you. Required documentation for this circumstance: Complete below information and submit a statement(s) from the private school that reflects tuition payments made in 2018 (Exclude any scholarships or discounts from amount paid).

Student's name	Age	School attended	Tuition paid
_____	_____	_____	_____
_____	_____	_____	_____

Educational Debt: If your parents are repaying on their own personal educational loans and/or PLUS (parent) loan(s) for a child who is no longer in college, report below the payments made in 2018.

Required documentation for this circumstance: Complete below information and submit last statement(s) from loan(s).

Loan type and for whom	Total remaining balance	Monthly payment	Number of payments made
_____	\$ _____	\$ _____	_____
_____	\$ _____	\$ _____	_____

Decrease in income: Complete this section only if income is substantially lower than income reflected on your 2019-20 FAFSA (2017 tax information).

Required documentation for this circumstance: Complete below 1-5 in addition to required documentation in section 1.

1. Submit most recent pay stub(s) for each parent in the household with employment earnings.
2. Submit official documentation to support the decrease of income. (example: notification/termination letter from company)
3. Date of decrease of income: _____ (example: last date of employment)
4. Write description for reason for reduced income. (example: layoff, company closing, disability, divorce, death)

5. Complete 2018 taxable income and 2018 untaxed income and benefits section below. (2019 if applicable to circumstance)

* Please list all sources of income/benefits received for all children or dependents (if applicable) living in the household from January 1 through December 31. Earnings made up to last date of employment and expected earnings through December 31, 2019 if circumstance applicable to 2019.

Taxable Income	2018	2019
Father's/step-father's earnings	\$	\$
Mother's/step-mother's earnings	\$	\$
Interest & dividends	\$	\$
Capital gains/losses	\$	\$
Pension/annuities/IRAs	\$	\$
Rents/partnerships/estate income	\$	\$
Severance package	\$	\$
Taxable Social Security benefits <i>(for parent & children under 18)</i>	\$	\$
Other taxable income <i>(report source - i.e. unemployment compensation)</i>	\$	\$

Untaxed Income and Benefits	2018	2019
Temp Assistance for Needy Families	\$	\$
Housing/food allowances <i>(members of the military/clergy/other)</i>	\$	\$
Payments to tax-deferred pensions & IRAs	\$	\$
Untaxed Social Security benefits	\$	\$
Child support received for all children	\$	\$
Untaxed IRA distributions/pensions	\$	\$
Tax-exempt interest	\$	\$
Other untaxed income <i>(report source (i.e. worker's compensation, disability))</i>	\$	\$

Other - If you believe you have circumstances not addressed by this form, you may submit a request for consideration on a separate sheet. Include as much information as possible and be sure to attach this signed form to your request.

Section 3 - STUDENT AND PARENT CERTIFICATIONS AND SIGNATURES

Best Person to contact if there are questions or additional information needed:

Name: _____ Phone: _____

Warning: Federal regulations state that purposely giving false or misleading information may result in a fine, a prison sentence, or both.

I (We) certify that all of the information reported to qualify for federal student aid is complete and correct. If I am asked, I agree to give proof that any information is correct. I understand that if failure to provide the required requested documentation may result in denial of this application. I (We) authorize Eureka College to release updated or corrected information to the Federal Student Aid Processing Center.

Parent signature _____ Date _____

Student signature _____ Date _____