



WESTMINSTER COLLEGE

# WESTMINSTER COLLEGE FINANCIAL AID OFFICE 2023– 2024 SPECIAL CIRCUMSTANCE FORM

Student Name: \_\_\_\_\_ Student ID # \_\_\_\_\_ SSN: XXX-XX-\_\_\_\_\_

When completing The Free Application for Federal Student Aid (FAFSA) for the 2023 – 2024 academic year, a family is asked to provide actual 2021 taxable and non-taxable income. A family, who expects its 2023 income to be **considerably** less than was reported on the FAFSA for 2021, should complete the form below and submit it to the Westminster College Financial Aid Office along with a **letter of explanation and appropriate documentation that supports the special circumstance**. Please note: *Special Circumstance Forms submitted without required supporting documentation and letters of explanation will not be considered. Submittal of a Special Circumstance Form does not guarantee that the student’s financial aid will be adjusted. Please include copies of your family’s 2021 Federal Tax Return and W-2 forms and your family’s 2022 Federal Tax Return and W-2 forms once completed.*

## Section A I am filing a Special Circumstance Form as a result of:

<p><b>Loss of employment</b></p> <p><input type="checkbox"/> Parent</p> <p><input type="checkbox"/> Student</p> <p><input type="checkbox"/> Spouse</p>	<p><b>Last date of employment</b></p> <p>_____</p>	<p><b>Required documentation</b></p> <ul style="list-style-type: none"> <li>■ Letter of explanation from student/parent</li> <li>■ Copy of last pay stub for each job held</li> <li>■ Proof of unemployment compensation benefits</li> <li>■ Report severance pay</li> </ul>	
<p><b>Substantial reduction in income from work.</b> Note: <i>Loss of overtime will not be considered</i></p> <p><input type="checkbox"/> Parent <input type="checkbox"/> Student <input type="checkbox"/> Spouse</p>		<p><b>Required documentation</b></p> <ul style="list-style-type: none"> <li>■ Letter of explanation from student/parent</li> <li>■ Copy of most recent pay stub showing income</li> </ul>	
<p><b>Reduction in or loss of benefit</b> (e.g., Unemployment, Worker’s Comp., Disability, Child Support, TANF)</p> <p><input type="checkbox"/> Parent</p> <p><input type="checkbox"/> Student</p> <p><input type="checkbox"/> Spouse</p>		<p>_____</p> <p>Date</p>	<p><b>Required documentation</b></p> <ul style="list-style-type: none"> <li>■ Letter of explanation from student/parent</li> <li>■ Notice of cancellation of benefits/income</li> <li>■ Loss of child support explanation letter should include how many children in the household will continue to receive child support and the amount that will be received each month</li> </ul>
<p><b>Death</b></p> <p><input type="checkbox"/> Parent</p> <p><input type="checkbox"/> Spouse</p>		<p><b>Date of death</b></p> <p>_____</p>	<p><b>Required documentation</b></p> <ul style="list-style-type: none"> <li>■ Letter of explanation from student/parent</li> <li>■ Copy of death certificate</li> </ul>
<p><b>Divorce/Separation</b></p> <p><input type="checkbox"/> Parent</p> <p><input type="checkbox"/> Student</p>		<p>_____</p> <p>Date</p>	<p><b>Required documentation</b></p> <ul style="list-style-type: none"> <li>■ Letter of explanation from student/parent</li> <li>■ List of current household members</li> <li>■ Documentation of separate households (i.e.: copies of bank statements, driver’s licenses, utility bills, leases, etc.)</li> <li>■ Amount of child or spousal support received and when payments began or are expected to begin</li> </ul>
<p>One-time lump sum payment</p> <p>\$ _____</p>		<p><b>Required documentation</b></p> <ul style="list-style-type: none"> <li>■ Letter of explanation from student/parent</li> <li>■ Documentation that identifies the source, amount and reason of the one-time income</li> <li>■ Documentation supporting how the funds were spent or invested</li> </ul>	

**Section B** Please complete all applicable fields.

**EXPECTED INCOME FROM JAN 1, 2023 UNTIL DEC 31, 2023**

<b>Income Source</b>	<b>Mother</b>	<b>Father</b>	<b>Student</b>	<b>Spouse</b>
Income earned from work	\$	\$	\$	\$
Unemployment benefits	\$	\$	\$	\$
TANF and/or AFDC	\$	\$	\$	\$
Child support received	\$	\$	\$	\$
Veteran's benefits	\$	\$	\$	\$
Severance pay	\$	\$	\$	\$
Disability benefits	\$	\$	\$	\$
Other Income	\$	\$	\$	\$
<b>Total 2023 income</b>	\$	\$	\$	\$

**Section C** *Certification requesting special circumstance consideration:*

The information provided on this form and supporting documents is true and complete to the best of my knowledge. I agree to provide additional documentation, if requested\*. I understand that if at any time the estimates of the 2023 income that I submit on this form change, I will contact the Financial Aid Office as soon as possible regarding the change. I understand that Special Circumstance Forms submitted without required supporting documentation and letters of explanation will not be considered. I also understand that submittal of a Special Circumstance Form does not guarantee that the financial aid will be adjusted. I further understand that I will be required to submit copies of the 2023 Federal Income Tax returns to Westminster College as final documentation of the special circumstance.

\_\_\_\_\_ I have included copies of my family's 2021 Federal Tax Return and W-2 forms. (Required)

\_\_\_\_\_ I have included copies of my family's 2022 Federal Tax Return and W-2 forms (Required)

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse Signature: \_\_\_\_\_ Date: \_\_\_\_\_

\*During the review, we may find that we need additional documentation. Please provide information about the best way for us to contact you.

Please return this form with supporting documentation to:

**Westminster College, Financial Aid Office, 319 S. Market St.  
New Wilmington, PA 16172-0001 Telephone: 724-946-7102 Fax: 724-946-6171 Email: [finaid@westminster.edu](mailto:finaid@westminster.edu)**