



Education for your future. Sisterhood for life.

OFFICE OF FINANCIAL AID - 900 EAST WASHINGTON ST., GREENSBORO, NC 27401 - FINANCIAL\_AID.EDU - (888) 370-8678 - FAX (336) 517-2204

## Office of Financial Aid 2018-2019 Special Circumstances

Student Name: \_\_\_\_\_ Student ID#: \_\_\_\_\_

When you completed the 2018-2019 Free Application for Federal Student Aid (FAFSA), it provided us your financial situation at the time you completed the form. We know that sometimes there are special circumstances that are not reflected on the FAFSA. When appropriate and sufficient documentation is provided, it may be possible to take these circumstances into account through a process called Professional Judgement (PJ). Be aware that a PJ is performed at the discretion of each institution and does not guarantee an increase in financial aid.

### Supply the following items for ALL requests:

- A completed 2018-2019 Special Circumstance Form
- A detailed, but concise narrative of the circumstances leading to the request (who, why, when)
- Signed 2016 AND 2017 tax return transcript for your parent(s) and/or yourself. You can request a tax return transcript online at [www.irs.gov](http://www.irs.gov) or by calling 1-800-908-9946.
- Copies of you and your parent's (if dependent) 2016 AND 2017 W-2's and schedules C and/or F of your Federal Income tax return, if applicable. If independent, include your spouse's forms.
- Verification Worksheet (available on-line: <http://www.carroll.edu/finaid/forms.cc>)
- Requested documentation pertaining to the specific circumstance (see below)

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### **My 2018 income will be significantly lower than my 2016 income due to (check all that apply):**

Involuntary reduction in parent, student or spouse employment income for at least 10 weeks in 2017 or 2018. As a general rule, the projected 2018 Adjusted Gross Income (AGI) should be at least 20% less than the actual 2016 AGI before submitting documentation.

#### **Documentation Required:**

- Your last pay stub
- Statement from previous employer indicating last day of employment
- If receiving unemployment compensation, a copy of your benefits determination

Unusual or excessive **2017 or 2018** medical expenses paid (not covered by insurance) that exceeds 10% of the Adjusted Gross Income reported on your 2016 Federal Income Tax Return.

#### **Documentation Required:**

- Enclose receipts and detailed listing of expenses already paid out-of-pocket and not reimbursed by insurance from January 2017 through the date of this request (please total all items).
- Schedule A of your 2016 and 2017 1040 tax form

Private tuition expenses at an elementary or secondary school for other children in the household during the 2018-2019 academic year.

#### **Documentation Required:**

- Enclose official tuition statement/invoice reflecting actual charges paid/due for the 2018-2019 academic year reflecting financial aid awarded (net charges) along with canceled checks or documentation of tuition payments paid.



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Your parents or you and your spouse have become legally separated or divorced after submission of your original

FAFSA. **Documentation Required:**

- Copy of legal separation order or divorce decree
- Date of separation/divorce: \_\_\_ / \_\_\_ / \_\_\_
- Documentation of expected child and/or spousal support payments

Complete loss of non-taxable income, such as Child Support, Worker's Compensation and Veteran's Benefits, for at least 10 weeks in 2018.

**Documentation Required:**

- Written statement from appropriate agency showing loss of benefit and termination date

Your spouse or parent has died after the submission of your original FAFSA.

**Documentation Required:**

- Copy of death certificate

A typical one-time taxable earning such as a capital gain, 401K disbursement or moving expenses reflected on a 2016 federal income taxes return.

**Documentation Required:**

- Statement indicating nature of earnings
- Documentation to show what the funds were used for
- 1099-R or statement showing amount received

**Expected 2018 Income**  
**January 1, 2018 – December 31, 2018**

If you checked #1 on the front of this form please complete this income section and include documentation supporting your amounts (attach current or last pay stub for each job included in your projected income). Please do your best to give estimates of the items requested below and submit the documentation to support these amounts. If you did not check #1, skip section and sign and date the form below.

	STUDENT	SPOUSE	FATHER	MOTHER
Projected Income from Work	\$	\$	\$	\$
Dates of Employment	From To	From To	From To	From To
Name of Employer(s)				
Other Projected Income*				

*\*Other income can include, but is not limited to Worker's Compensation, pension/annuities, unemployment benefits, Social Security Benefits, child support/alimony, retirement/disability benefits, welfare benefits (excluding food stamps or subsidized housing).*

We will carefully review your information, but remind you that even though results may lower the Expected Family Contribution (EFC) or raise the cost of attendance, it may not result in additional financial aid.

