

SPECIAL CIRCUMSTANCES DOCUMENTATION REQUEST FORM

Purpose

This form must be used **as part of the initial financial aid application submission** if a family has significant financial hardships that may impact their eligibility for aid. Special circumstances that are not documented at the time of submission **cannot be considered in the initial review** and may require an appeal after the decision is made.

Applicant Information

Student Name: _____
Grade Level: _____
Parent/Guardian Name: _____
Phone Number: _____
Email Address: _____

Reason for Special Circumstances Request

Please check all that apply and provide an explanation below:

- ☐ Loss of employment or reduction in income
- ☐ Unexpected medical expenses
- ☐ Divorce or legal separation
- ☐ Death of a primary income earner
- ☐ Natural disaster or other unforeseen event
- ☐ Other (please specify): _____

Explanation of Circumstances

Please provide a detailed explanation of the circumstances affecting your financial situation:

Required Supporting Documentation

Families must submit **one or more** of the following documents to verify their financial hardship:

- ☐ Termination letter or proof of job loss
- ☐ Recent pay stubs showing reduced income
- ☐ Medical bills and insurance statements
- ☐ Divorce decree or legal separation agreement
- ☐ Death certificate of income earner
- ☐ Other relevant financial records

Submission Guidelines

- **This form and supporting documents must be submitted along with the initial financial aid application.**
- Documents should be **clear, legible, and in PDF format** (no screenshots or photos).
- Incomplete submissions may not be considered for special circumstances adjustments.

Certification & Signature

By signing below, I affirm that the information provided is accurate and complete to the best of my knowledge. I understand that submitting false or incomplete information may result in denial of financial aid adjustments.

Parent/Guardian Signature: _____

Date: _____

Office Use Only: Date Received: _____

Reviewed By: _____

Decision: ☐ Approved ☐ Denied

Notes: _____