JEFFERSON COMMUNITY COLLEGE

2023-2024 APPEAL FOR SPECIAL CIRCUMSTANCES

If you or your family's financial situation has changed since 2021, please use this form to document any special circumstances you may have. The Jefferson Community College Financial Aid Office will review this form to determine if a change in your financial aid needs to be made. Our office will notify you of our decision. **Please note:** The Financial Office's authority to make changes is limited. We also reserve the right to deny an appeal for special circumstances and/or request additional documentation based on the information provided on this form. Application should be submitted a minimum of 8 weeks before the semester begins. The student must file the 2023-2024 Free Application for Federal Student Aid (FAFSA) before submitting this application for consideration.

Student's Name		
Student ID: J	Date of Application	
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circumstance(s), which best describe	cial Cirsumstances due to one of the following reasons. Please check the fo your family's financial situation. Indicate the date when the change occur Also, in numbers 1, 2, or 4, designate whose situation has changed (i.e.,	red and
Date of change:		
1) O Unemployment or change in en	nployment (Whom:)	
2) O Death of parent or spouse. (Wh	nom:)	
3) O Divorce/separation. (Provide ea	arlier date:)	
4) O Disability of parent or student/s		
5) One time income benefit (What	t is the one time benefit you wish to have excluded?	
6) Medical Expenses. Please list:		
7) Other. Please explain:		

Before an adjustment can be made to your status you must provide complete information regarding your financial estimates for the period January 1, 2023 to December 31, 2023 on the reverse side of this form.

Dependent Students: Provide financial estimates for yourself and your parents. If your parents are separated or divorced give only information of the custodial parent. If the loss of income was due to the death or your parent, give only information regarding your surviving parent.

Independent Students: Provide financial estimates for you and your spouse. If you are divorced or separated, give only your information. If the loss of income was due to the death of your spouse, provide only your information in the estimates.

Please complete the income questions and the certification on the reverse side and attach appropriate documentation. This form may be returned to you or additional information requested if you do not provide detailed information.

Please return this completed form, 2022 Federal tax returns and W-2 forms for all individuals (parent(s), self, and/or spouse), the 2023-24 Verification Worksheet and other supporting documentation to:

Jefferson Community College Enrollment Services 1220 Coffeen Street Watertown, New York 13601

ANTICIPATED INCOME FOR Jan – Dec 2023	<u>FATHER</u>	MOTHER	STUDENT	SPOUSE
Wages, salaries, tips (including disability				
PaymentsAnd any income from work)				
Interest/dividend income				
Unemployment Compensation				
Pension				
Alimony				
Taxable Social Security Income				
Untaxed Social Security Income				
Other Taxable Income, please specify:				
AFDC/TANF or SNAP				
Child Support Received				
**				
Worker's Compensation				
Disability Benefits Veteran's Non-education Benefits				
Other untaxed income, please specify:				
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Estimate as closely as you can the total amount experience only. NOTE: If income will not be received in 20 %				
¥ ¥	23 from any of of the changes	the sources listed	l, please enter a	zero.
only. NOTE: If income will not be received in 202 Please provide a detailed explanation below, or	23 from any of of the changes	the sources listed	l, please enter a	zero.
Please provide a detailed explanation below, of situation is. Attach a separate sheet of paper PART III: CERTIFICATION All of the information on this form is true and confficial, I agree to give proof of the information that a copy of my federal income tax return. I also rea	of the changes if needed: omplete to the at I have given	that have occur best of my known on this form. I	I, please enter a street and what y	your current by an authorized
Please provide a detailed explanation below, of situation is. Attach a separate sheet of paper PART III: CERTIFICATION All of the information on this form is true and confficial, I agree to give proof of the information the	of the changes if needed: omplete to the at I have given	that have occur best of my known on this form. I	I, please enter a street and what y	your current by an authorized
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SPECIAL CIRCUMSTANCES 2023-2024

REASON

- 1. Unemployment or Change in Employment
- 2. Separation or Divorce (must be separated for at least 3 months)
- 3. Medical Expenses
- 4. One Time Income Benefit
- 5. Death of a Parent or Spouse
- 6. Disability
- 7. Other

REQUIRED DOCUMENTATION

- Unemployment Benefits Statement.
- Most recent or final pay stub(s) for each job
- Legal separation or divorce paper <u>or</u> a document (lease, utility bill, etc.) showing separate residence.
- Proper documentation of expenses (hospital invoices, doctors' bills, etc.) along with a signed summary of all expenses paid for by the student (or parents)
- Signed letter explaining the benefit and what the income was used for.
- Obituary or any related document.
- Physician's letter indicating the date and the extent of the disability.
- Supporting documentation.

In order to be evaluated for Special Circumstances, the following verification items must be submitted in addition to the required documentation listed above.

- Student/Spouse and/or Parents 2022 Federal Tax Return or IRS Tax Return Transcript*
- Student/Spouse and/or Parents 2022 W2's (wage & earnings statements)
- 2023-2024 Verification Worksheet

Please Note: Additional information may be requested by our office as needed.