

Office of Financial Aid
Frostburg State University

Request for Special Condition Consideration

Academic Year 2009-2010

The process of determining a student's eligibility for federal aid is basically the same for all applicants. However, we realize that a family's situation may change or there may be special circumstances that cannot be addressed on the Free Application for Federal Student Aid (FAFSA). Therefore, **in some cases**, the Office of Financial Aid may take into account circumstances that might affect you and your family's ability to contribute to your education. If you believe you, or your family, are burdened by special circumstances, please provide **all** the requested documentation and submit it with this form to the Office of Financial Aid, 114 Pullen Hall, Frostburg State University, 101 Braddock Road, Frostburg, MD 21532.

Once all of your information has been reviewed and a decision has been made, the Financial Aid Office will make any necessary adjustments and send out a new award letter. Remember, the financial aid officer's decision is final and cannot be appealed to the Department of Education.

You will normally receive a response to your request in 10-14 business days. The response time may increase during peak periods (May-August).

Student's Name

Social Security Number

Street

City

State

Zip

Home Phone

Work Phone

Award Period for which you are requesting special consideration:

_____ Fall 2009

_____ Spring 2010

_____ Fall/Spring 2009-2010

Required documentation for all parents/students requesting special condition:

1. A signed letter with specific information from parent/student explaining reasons for change in situation
2. A signed copy of 2008 federal tax returns

PLUS any of the following that pertains to your situation:

A. Required documentation, in addition to above, for parents/students requesting a change in employment or unemployment:

1. Letter from employer indicating last day of employment, any severance pay, and/or any benefits, which will continue after dismissal.
2. Statement from employer or last pay stub showing amount earned in 2009 for all parties involved
3. Proof of receipt or denial of unemployment benefits
4. Proof of any disability pay or social security benefit, if applicable
5. If parent/student has reduction in income due to change in job, include proof of new salary
6. Proof of spouse's income for 2009 award year

B. Required documentation, in addition to A, for a divorce or Separation:

1. Copy of divorce agreement
2. Copy of W-2 from supporting parent
3. Proof of child support received

C. Required documentation, in addition to A, for change in child support, alimony, social security benefits, disability benefits or unemployment:

1. Proof of funding received for 2009 year
2. Proof of loss of money from agency or lawyer (child support or alimony)

D. Required documentation, in addition to A, for a nonrecurring income:

1. Complete tax return for 2008
2. An explanation of the origin of the money and proof of how the money was spent or invested

E. Required documentation, in addition to A, for unusual Medical and Dental Expenses:

1. Complete tax return for 2008
2. All receipts showing student/parent payment of medical and dental expenses (cancelled checks can be used).

F. For other special conditions not covered by any of the above stipulations:

1. A letter of explanation describing the situation
2. Any and all supporting documentation to clarify your request

Keep in mind, the Financial Aid Office may require additional documentation before rendering a decision on your request. A decision will never be made until the student/parent provides all requested documentation.

Please submit this form and all required documentation together to ensure that a swift and accurate decision is made.

Signatures

I/We declare the information I/we have provided is true and accurate to the best of my/our knowledge.

Student's Signature

Date

Spouse's Signature

Date

Parent's Signature

Date

OFFICE USE ONLY

| STUDENT CHANGES | PARENTAL CHANGES |
|---|-----------------------|
| AGI _____ | AGI _____ |
| TAXES PAID _____ | TAXES PAID _____ |
| INCOME FROM WORK _____ | FATHER INCOME _____ |
| WORKSHEET A _____ | MOTHER INCOME _____ |
| WORKSHEET B _____ | WORKSHEET A _____ |
| NUMBER IN HOUSE _____ | WORKSHEET B _____ |
| _____ | NUMBER IN HOUSE _____ |
| NEW EFC _____ | |
| SPECIAL CONDITION APPROVED/DENIED DUE TO: | |
| _____ | |
| _____ | |
| _____ | |