



2019-2020 Special Circumstances Income Adjustment Appeal

College of The Albemarle makes every effort to assist students and parents by providing financial assistance to help meet the cost of education. We recognize that there may be extenuating circumstances that affect the student's or parent's ability to provide the amount that the family is expected to pay. Certain adjustments are already considered in the calculation of a family's ability to meet expenses in the formula that calculates financial need. Therefore, College of The Albemarle will not always be able to reduce your expected contribution to meet educational costs based on your unique circumstances. The United States Department of Education provides in the Higher Education Amendments of 1998 a reaffirmation of the use of professional judgment in determining eligibility for federal financial aid. This provision allows for consideration of projected year income, rather than a prior year income, to calculate a student's eligibility. Your family situation must meet one of the criteria used by College of The Albemarle to determine special circumstances. If your family meets a special circumstance requirement in the 2019-2020 award year, your eligibility may be recalculated using expected income from 2019. The **DEADLINE** to submit this form for the 2019-2020 award year is February 14, 2020. Special consideration is generally given only for those circumstances described on this form.

Student Information

Student's Last Name	First Name	M.I.	Student ID #
Student's Street Address (include apt. number)			Student's Date of Birth
City	State	Zip Code	Student's Email Address
Student's Phone Number (include area code)			Student's Alternate Phone Number

Completion of Personal Statement

Every applicant requesting a review of his/her application must describe in detail the circumstances that merit consideration. You should clearly describe all of the details surrounding your special circumstances. You should specifically explain how those circumstances will affect your family's financial situation for 2019.

Please complete one of the six sections (A-F) that best applies to your situation.

A. Loss of job—currently unemployed

Name of person who was employed _____

Relationship to student _____

Name of employer _____

Date last worked and reason for job loss _____

Qualify for unemployment? _____

If so, what is gross amount of benefits per week \$ _____

Beginning and ending dates of benefits _____

Eligible for any government/retraining benefits? _____

If yes, list benefits _____

Will unemployed person be looking for employment in the next 12 months? _____

If yes, what are expected earnings per month? \$ _____

If no, why won't this person be looking for employment? _____

Required Documentation:

- Last pay stub in 2019 from all jobs
- Severance letter/notice if available
- Unemployment benefits statement from Employment Security Commission
- 2017 Signed Federal Tax Return and W-2's
- 2018 Signed Federal Tax Return and W-2's
- 2019-2020 Household Size/Number in College Form (attached)
- 2019-2020 Asset Information Form (attached)

B. Reduction in income/hours worked

Name of person who has a reduction in income _____

Relationship to student _____

Name of employer _____

(Include former and new employer names, if applicable)

Date of change and reason for reduction _____

Former gross income level \$ _____ /wk or \$ _____ /mo

New gross income level \$ _____ /wk or \$ _____ /mo

Will this person be looking for other or additional work in the next 12 months? _____

If yes, what are expected earnings? _____

If not, why won't this person be looking for employment? _____

Required Documentation:

- Most recent current pay stub showing new income levels for 2019.
- 2017 Signed Federal Tax Return and W-2's
- 2018 Signed Federal Tax Return and W-2's
- 2019-2020 Household Size/Number in College Form (attached)
- 2019-2020 Asset Information Form (attached)

C. One time Income/Gains

What amount was a one-time distribution in 2017? \$ _____

What was the source/reason for these funds? _____

How were these funds used/spent? Provide a complete account of the expenditures. _____

Required Documentation:

- Documentation of distribution payment (such as 1099-R)
- 2017 Signed Federal Tax Return and W-2's
- 2018 Signed Federal Tax Return and W-2's
- 2019-2020 Household Size/Number in College Form (attached)
- 2019-2020 Asset Information Form (attached)

D. Unusual Medical expenses

Name of person incurring medical expenses _____

Relationship to student _____

Nature of illness _____

Total amount paid in 2017 \$ _____

*(Include only amounts for medical expenses paid by cash, check or credit card. **Do not include amounts paid by insurance or balances still owed to medical providers.**)*

Required Documentation:

- Documents showing patient's name and medical diagnosis
- Itemized listing of total amount paid, including payment documentation
- 2017 Signed Federal Tax Return and W-2's
- 2018 Signed Federal Tax Return and W-2's
- 2019-2020 Household Size/Number in College Form (attached)
- 2019-2020 Asset Information Form (attached)

E. Divorce/Separation of spouse or parent

Individuals divorced or separated _____

Relationship to student _____

Date of separation or divorce _____

Required documentation:

- Copy of divorce or separation statement
- 2017 Signed Federal Tax Return and W-2's
- 2018 Signed Federal Tax Return and W-2's
- 2019-2020 Household Size/Number in College Form (attached)
- 2019-2020 Asset Information Form (attached)

F. Death of spouse or parent

Name of person deceased _____

Relationship to student _____

Date of death _____

Required documentation:

- Copy of death certificate
- 2017 Signed Federal Tax Return and W-2's
- 2018 Signed Federal Tax Return and W-2's
- 2019-2020 Household Size/Number in College Form (attached)
- 2019-2020 Asset Information Form (attached)

All Applicants Must Complete This Section

Name of individual who had the change in income: _____

Date of last pay stub: _____

Gross earnings reported on last pay stub in 2019 \$ _____

<u>Sources of Income from last pay stub – 12/31/19</u>	<u>Income from last paystub – 12/31/19</u>
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Earnings from Work (include self-employed)	\$ _____
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Unemployment Benefits	\$ _____
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Disability Income or Social Security	\$ _____
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Child Support	\$ _____
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Other (list) _____	\$ _____
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_____	\$ _____
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_____	\$ _____
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_____	\$ _____
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Certification Statements And Signatures

Certifications and Signatures

By signing below, I certify that the information provided on this form is true and correct to the best of my knowledge. I affirm that I have not knowingly or intentionally provided any false statements or fraudulent documentation.

Student's Signature

Date

Spouse's Signature (if applicable)

Date

Parent's Signature (if applicable—Dependent Students Only)

Date



2019-2020 Household Size/Number in College Form for Income Adjustment

STUDENT INFORMATION:

Last Name	First Name	Student ID#
Phone # (Include Area Code)		Email Address

HOUSEHOLD INFORMATION

- If you are a **dependent student**, include:
- Yourself
 - Your parent(s) used on FAFSA, (include step-parent) even if you don't live with your parents
 - Your parent(s)' other children if:
 - a) your parent(s) will provide more than half of their support from July 1, 2019 through June 30, 2020, or
 - b) the children would be required to provide parental information if filing a FAFSA for 2019-20
 - Other people, only if they now live in your parents' household, and your parents will continue to provide more than half of their support through June 30, 2020
 - Don't list your parents' college and degree program if they are also in college

- If you are an **independent student**, include:
- Yourself
 - Your spouse (if you are married)
 - Your children or your spouse's children, if you or your spouse will provide more than half of their support from July 1, 2019 through June 30, 2020, even if the children do not live with you
 - Other people, only if they live in your household and you provide more than half of their support and will continue to do so through June 30, 2020

Full Name	Age	Relationship	Name of college (If enrolled during 2019-2020 year and at least half-time student)

CERTIFICATION: Please sign here.

By signing this worksheet, I certify all the information reported is complete and correct. Warning: If you purposely give false or misleading information, you may be fined, be sentenced to jail, or both.

Student Signature	Date
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Parent Signature (If a student is dependent, this must be a parent whose information was reported on the FAFSA)	Parent Name (Please Print)	Date
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2019-2020 Asset Information Form for Income Adjustment

Last Name

First Name

Student ID #

	Student's Balance	Parents' Balance
As of today , what is your (and spouse's) total current balance of cash, savings, and checking accounts? Do not include student financial aid.		Include parents' amounts below if the information was required on your FAFSA
As of today , what is your parents' total current balance of cash, savings, and checking accounts? Do not include student financial aid.	X	
As of today , what is the net worth of your (and spouse's) investments, including real estate (not your home)? Net worth means current value minus debt.		X
As of today , what is the net worth of your parents' investments, including real estate (not your home)? Net worth means current value minus debt.	X	

Notes:

- Investments include real estate (do not include the home you live in), trust funds, UGMA and UTMA accounts, money market funds, mutual funds, certificates of deposit, stocks, stock options, bonds, other securities, Coverdell savings accounts, 529 college savings plans, the refund value of 529 state prepaid tuition plans, installment and land sale contracts (including mortgages held), commodities, etc. Investment value means the current balance or market of these investments as of the day you filed your FAFSA.
- Investment debts mean only those debts that are related to the investments.
- Investments do not include the home you live in, the value of life insurance, retirement plans (pension funds, annuities, non-education IRAs Keogh plans, etc.) or cash, savings, and checking accounts already reported above.
- Students who must report parental information on their FAFSA should report all qualified educational benefits or education savings accounts owned by parent-including Coverdell savings accounts, 529 college savings plans and the refund value of 529 state prepaid tuition plans. If the account is owned by a student (or the student's spouse) who is not reporting parental information, the value is to be reported as an investment.
- If net worth is one million dollars or more, enter \$999,999. If net worth is negative, enter 0.

Continue on reverse side



	Student's Balance	Parents' Balance
As of today , what is the net worth of your (and spouse's) current business and/or investment farms? For a family farm, see notes.		X
As of today , what is the net worth of your parents' current businesses and/or investment farms? For a family farm, see notes.	X	
Notes: <ul style="list-style-type: none"> • <u>Business and/or investment farm value includes</u> the market value of land, buildings, machinery, equipment, inventory, etc. Business and/or investment farm debt means only those debts for which the business or investment farm was used as collateral. • <u>Do not include</u> the value of a family farm that you (your spouse or your parents) live on and operate. • <u>Do not include</u> the value of a small business that you (your spouse or your parents) own and control that have 100 or fewer full-time equivalent employees. 		

CERTIFICATION: Please sign here.

By signing this worksheet, I certify all the information reported is complete and correct. Warning: If you purposely give false or misleading information, you may be fined, be sentenced to jail, or both.

Student's Signature

Date

Parent's Signature (If a student is dependent, this must be a parent whose information was reported on the FAFSA)

Date