



SPECIAL CIRCUMSTANCES APPEAL INDEPENDENT

EITC Financial Aid Office
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1600 S. 25th E. Idaho Falls, Idaho 83404

Student's Name _____ SSN _____
(Please Print)

If you and/or your spouse (if applicable) have experienced a significant drop in income from the previous year, or if you have a special circumstance situation which may affect your eligibility for financial assistance, you may complete this appeal form.

If you are claiming a substantial loss of income from the previous year, we will only accept a Special Circumstance appeal after January 1 for the academic year that you are requesting. At which time you and/or your spouse (if applicable) must submit copies of the current end year to show your actual income verses the estimated for that school year. Submit U.S. federal tax returns, W2's and any other applicable documentation to support your claim.

You must complete the current years FAFSA before submitting this form.

Verification of your special circumstance appeal will be required. Meaning, if your FAFSA was not originally selected for verifications you will be selected for purposes of this appeal. It is your responsibility to decide how best to document your appeal. Examples of additional forms besides those that you submit for verification could include: notice of loss of employment, documentation of untaxed income, divorce stipulation, death certificate, medical/dental expense receipts Schedule A from your current U.S. federal tax return, etc.

This appeal must be submitted 30 days prior to the last day of class for the semester(s) in question. Appeals submitted after this deadline may not be accepted.

SECTION I: Please attach a complete explanation regarding your change of financial situation.

SECTION II: Required Documents

Required documents for the Special Circumstance Appeal (Loss of Income)

Attach the following documents to this appeal. (Missing documents will delay the processing of this appeal.):

- Student's current Federal Tax Return (signed copy);
Student's spouse current Federal Tax Return (signed copy)(if applicable);
Student's current years W-2;
Student's spouse current years W-2 (if applicable);
Independent Verification Worksheet with the information for the current year.

I certify that all information in this appeal and all verification documents are true and accurate. I understand the conditions of this appeal and agree to provide verification of the information I have given on this form. I further certify that the income information I have submitted for the tax year in question represents the entire income for that year and that I will not submit further income information for myself/spouse after this appeal has been submitted.

Student Signature: _____ Date: _____

Spouse Signature: _____ Date: _____

OFFICE USE ONLY: New EFC: _____ EDE Correction #: _____
Comments: _____
Approved: _____ Denied: _____
Initials: _____ Date: _____