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2017-2018 Special Condition Form

Complete this appeal form if you believe there are special circumstances that were not considered during your financial aid review or you can now document a significant change in your family's financial circumstance. Federal regulations and institutional policies require that exceptions fall within certain parameters and are accompanied with supporting documentation. This form is designed to assist you in providing information critical to the review of your appeal.

Student Information

Student Name:

Banner ID:

Date:

Submit a Letter of Explanation

Please **attach a separate letter** that includes additional details describing the basis for your appeal request. Be sure to include all relevant information (i.e. dates circumstances occurred, your best estimates to costs and figures being asked of you) and any other information you feel would allow you to explain the circumstances fully. Please provide any additional supporting documentation, even if it was not specifically asked for on this form, if you feel it would strengthen your appeal.

Submit 2015 Tax Information

If you have not already submitted it to the office, please **attach a hard copy** of your finalized 2015 federal tax return including W2 statements and all schedules, for both parent(s) & student. Please note, tax information provided on the FAFSA or CSS PROFILE will not fulfill this request, and we do not participate in CSS IDOC. *Please check the most appropriate circle below for the parent(s) & student:*

Parent Taxes

- 2015 federal tax forms for Parent 1 & 2 have already submitted to the College, including all schedules and W2.
- 2015 federal tax forms are attached for Parent 1 & 2, including all schedules and W2.
- Parent 1 & Parent 2 were not required to file 2015 federal tax forms.

Student Taxes

- 2015 federal tax forms for student have already been submitted to the College, including all schedules and W2.
- 2015 federal tax forms for student are attached, including all schedules and W2.
- The student was not required to file 2015 federal tax forms.

Deadlines and Responses

- For freshman appeals, we will make every attempt to respond to an appeal prior to the May 1 deposit deadline if all information requested is received by our office no later than **April 21**. For Early Action applicants, we will *begin* to review appeals after initial Regular Decision awards are released in mid-March. After the deposit deadline, all incoming students will follow the process and adhere to the deadlines for a returning student.
- The majority of returning student appeals received by **July 31** will be responded to in **mid-September**, and the majority of returning student appeals received by **November 30** will be responded to in **mid-January**.
- Returning students will be notified of the appeal decision via CyberFriar in the message section. For freshmen, prior to May 1, the response will be sent by mail, after the May 1 deposit deadline, the response will be available via the CyberFriar message section.

Certification and Signatures

- We understand that if selected for verification by the U.S. Department of Education, all documents associated with that process must also be submitted to the Office of Financial Aid prior to reviewing any appeal information.
- We affirm that the data contained on this form and on all attached supporting documentation is true and complete to the best of our knowledge. If any of our projections change, we will immediately notify the Office of Financial Aid in writing. We also understand that if we are missing information or further clarification is necessary this may delay the review of the appeal and the response.
- We will make arrangements to pay our bill on time and not wait for the outcome of our appeal on file. We understand that submission of an appeal does not guarantee an adjustment to a student's award, nor prevent financial holds or the accrual of late fees on any unpaid student account balances.

Student or Parent Signature: _____

Please **check all that apply** and **submit all documents listed**. Please note high credit card debt, car payments, wedding expenses, vacations or other discretionary expenses will not be considered.

PASSING OF A LOVED ONE

During 2016 or 2017, the student's parent or the student's spouse has passed away.

- In your letter of explanation, please describe any pending or finalized changes in assets (including life insurance benefits received)
- Provide information about income (social security benefits, pension, and retirement monies received) resulting from this event. If unknown at this time, indicate so we may follow up.

DIVORCE OR SEPARATION

During 2016 or 2017, the student's parent or the student has become divorced, separated or ended their domestic partnership.

- In your letter of explanation, describe when the divorce, separation, or domestic partnership ended and who the student is going to be living with. If joint custody, who is the child living with more? Per federal guidelines, the custodial parent is the parent who the student lived with the most in the 12 months preceding the FAFSA filing date.
- Provide details on how joint assets will be divided, including: cash, home, other real estate, business, etc.
- Provide statement about child support received/paid or alimony expected to be paid/received and to whom.

ONE-TIME INCOME

During 2015 your income was inflated by a one-time occurrence such as a capital gain, pension/IRA withdrawal, retroactive pay, etc.

Note: A one-time income appeal is intended to represent income that will only happen once and will not repeat again. It will only be considered one time during a student's enrollment at Providence College—it will not be considered one time per year.

- In your letter of explanation, please provide a detailed explanation of the one-time income from the 2015 tax year. Include where the income is now and whether or not it will repeat in a future year.
- Attach documentation/statement from the source of the one-time income showing total dollar figure received.

MEDICAL/DENTAL EXPENSES

During 2015, 2016, or 2017 you have incurred medical/dental expenses not covered by your health insurance plan.

- If you are appealing based on medical/dental expenses, in addition to the required documentation listed below, please provide the following applicable information:
 - If your medical/dental expenses occurred in 2015, we will need copies of your 2015 federal tax return and w2s.
 - If the expenses occurred in 2016, we will need copies of your 2016 federal tax return and W2s—if they are not available at the time this form is completed, please provide estimates on the Income Worksheet on page 4 of this form.
 - If these expenses occurred in 2017, please fill out the estimated income column for 2017 on the Income Worksheet. Do not leave any field blank. Use '0' if the answer is zero, or 'N/A' if the answer is not applicable.
- In your letter of explanation, detail the nature of the expenses. *Dental expenses related to orthodontics will not be considered.*
- Provide a detailed listing of all the out-of-pocket medical/dental (including medical premiums) incurred in and paid for during 2015, 2016, or 2017. Do not include any expenses that your insurance will reimburse.
- You should include documentation such as receipts, insurance records or your doctor's records for every expense you report, or if you itemize these expenses on your tax return, you may provide a copy of your 2015 or 2016 (as applicable) Schedule A instead.

SECONDARY SCHOOL TUITION/TUTORING

During the 2015-2016 or the 2016-2017 academic year tuition or tutoring expenses were incurred for a sibling who has a disability and requires special schooling.

- Attach a 3rd party letter that documents the medical/learning disability of the sibling that requires special schooling or tutoring. *Expenses will not be considered unless it was medically necessary and critical to their educational success.*
- Attach cancelled checks as proof of tuition/tutoring expenses for 2015-2016 or 2016-2017.

CHILD OR ELDER CARE EXPENSES

During 2015 or 2016 you have incurred expenses related to your children or parent

- In your letter of explanation detail the total expenses incurred for 2015 or 2016.
- Attach IRS form 2441 or cancelled checks as proof of expenses incurred for 2015 or 2016.

SECONDARY DOMICILE

The student's parents or the student's spouse live at separate residences due to the nature of one person's employment.

- In your letter of explanation, outline why you are maintaining two households.
- Attach receipts for all expenses paid in 2015 or 2016 directly related to the second household. Be sure to include items like rent and utilities.

If you are appealing based on the **loss of untaxed income/benefits** or an **involuntary loss of wages/employment**, in addition to the required documentation listed below, please provide the following applicable information:

- If the loss occurred in 2016, we will need copies of your 2016 federal tax return and W2s—if they are not available at the time this form is completed, please provide estimates on the Income Worksheet on page 4 of this form.
- If the loss occurred in 2017, please fill out the estimated income column for 2017 on the Income Worksheet. **Do not leave any field blank.** Use '0' if the answer is zero, or 'N/A' if the answer is not applicable.

LOSS OF UNTAXED INCOME/BENEFIT

During 2016 or 2017 a member of your family has lost some type of untaxed income/benefits (child support, SSI, etc.).

- In your letter of explanation, detail the nature of the untaxed income/benefit. Provide annual figures for 2015, 2016 and 2017 and the date the resource stopped.
- Attach any documentation from the agency (if applicable) who is ending the benefit.

INVOLUNTARY LOSS OF WAGES/EMPLOYMENT

Loss of income in 2016 or 2017 should be for a period greater than 10 weeks and/or generally at least 20% less than 2015 income.

- In your letter of explanation, detail when the loss of income began and overall loss to date. ***Loss of overtime or bonus income will not be considered.***
- In your letter of explanation, detail unemployment and severance received or expected.
- Attach last pay stub from former position.
- Attach most recent paystub showing new or changed salary, if applicable.
- Attach most recent paystub from the other parent (if married or in a domestic partnership.)

Income Worksheet

Taxable Income	Actual Income 2015 Tax Year	Actual Income 2016 Tax Year	Estimated Income 2017 Tax Year
Parent 1 Wages (<i>gross amount</i>)	\$	\$	\$
Parent 2 Wages (<i>gross amount</i>)	\$	\$	\$
Interest/Dividend Income	\$	\$	\$
Net Income/Loss from Business (<i>reported on Schedule C, E or F</i>)	\$	\$	\$
Severance Pay	\$	\$	\$
Capital Gain/Loss (<i>reported on Schedule D</i>)	\$	\$	\$
Rental Income/Loss (<i>reported on Schedule E</i>)	\$	\$	\$
Taxable Portions of Social Security	\$	\$	\$
Taxable Portions of Pension/Annuity Withdrawals	\$	\$	\$
Income from Royalties, Partnerships, Estates, & Trusts	\$	\$	\$
Alimony Received	\$	\$	\$
Unemployment Compensation	\$	\$	\$
Other Taxable Income: _____	\$	\$	\$
Untaxable Income			
Untaxed Portion of Social Security	\$	\$	\$
Untaxed Portion of Pension/Annuity Withdrawal	\$	\$	\$
Welfare Benefits (<i>i.e. AFDC, TANF, SNAP</i>)	\$	\$	\$
Child Support Received	\$	\$	\$
Voluntary Contributions to Retirement Plans (<i>i.e. 401K, 403B</i>)	\$	\$	\$
Veteran's Benefits	\$	\$	\$
Housing Allowance (<i>subsidized, military, clergy</i>)	\$	\$	\$
Other Untaxed Income (<i>includes cash received or money paid on your behalf not reported elsewhere on this form</i>): _____	\$	\$	\$