



# 2022-2023 Special Circumstance Application

Financial Assistance  
8600 University Boulevard  
Evansville, IN 47712  
Phone: 812-464-1767 or 800-467-1965  
Fax: 812-461-5305 / Email: [finaid@usi.edu](mailto:finaid@usi.edu)

Your eligibility for need-based aid is determined using your 2022-2023 FAFSA results. Use this form to report recent changes in your family's financial situation that are not addressed on the FAFSA that may impair your ability to contribute toward the cost of your education.

## A. Student Information

\_\_\_\_\_  
Last Name                                      First Name                                      M.I.                                      USI Student ID number (SSN if ID is unknown)

## B. Instructions (READ CAREFULLY)

1. Complete the 2022-2023 Free Application for Federal Student Aid (FAFSA).
2. Complete the 2022-2023 Special Circumstance Form and **SUBMIT A SIGNED STATEMENT.**
  - Section D – You must check a box in Section D and answer the additional questions. Submit the required documentation listed next to the box you selected.
  - Section E – You must project 2022 Income and Resources. Do not leave this section blank.
  - Section F – The student must sign the form. If the student is dependent, the form requires the parent signature as well.
  - **Signed Statement - Provide a typed, signed, and detailed description of the basis of your special circumstance. Include names of employers, dates, etc. Provide any additional information that would help our office understand your family's circumstances.**
3. Continue to monitor your myUSI for updates. Additional documentation may be required but will vary based on your circumstances.
4. Your documentation will be reviewed to determine if the changes made would increase your aid eligibility. The results will be posted on your myUSI and you will receive a letter in the mail once this process has been completed.

## C. Deadline(s) and Other Important Information (READ CAREFULLY)

- For fall only enrollment, all documentation must be complete and submitted no later than December 2, 2022.
- For academic year, spring only or summer enrollment all documentation must be complete and submitted no later than April 28, 2023.
- It is important to note that we cannot process a Special Circumstance after the student is no longer enrolled. Changes to the academic calendar may change the deadline dates above.
- Submission of this form does not guarantee approval nor guarantee increased financial aid eligibility. This process simply allows financial aid administrators to make adjustments to the FAFSA application based on the documentation/information received. This may or may not result in a change to financial aid eligibility.
- The Special Circumstance Process is optional and may take several weeks to process.

**D. Reason for Appeal (CHECK ALL THAT APPLY)**

<input checked="" type="checkbox"/>	Reason for Appeal	Initial Required Documentation <b>(in addition to the signed statement)</b>
<input type="checkbox"/>	<p><b>Reduction/Loss of Employment/Income</b></p>	<ul style="list-style-type: none"> <li>✓ Dependent Students - Submit copies of your parent(s)' last/most recent paystub(s) from all 2022 employment.</li> <li>✓ Independent Students - Submit copies of student/spouse last/most recent paystub(s) from all employment in 2022. (Paystubs should show year-to-date income, as well as deductions.)</li> <li>✓ Submit a copy of the severance statement (if applicable)</li> <li>✓ Submit documentation of all other 2022 year-to-date income/benefits such as unemployment, short-term, long-term disability, IRA/Pension withdrawals, etc.</li> </ul> <p>Who experienced the Reduction/Loss: _____ Date of Reduction or Loss: ____/____/____</p> <p>➤ Name of Employer: _____</p> <p>Date began new job, if applicable: ____/____/____</p> <p>➤ Name of New Employer: _____</p> <p>Has unemployment been received as a result? YES / NO</p> <p>Has severance pay been received as a result? YES / NO</p> <p>Has the student/parent had to withdraw funds from an IRA/Pension as a result? YES / NO</p>
<input type="checkbox"/>	<p><b>Legal Separation or Divorce <u>AFTER Filing FAFSA</u></b></p> <p>* This is referring to the marital status of the student or the parents listed on FAFSA.*</p>	<ul style="list-style-type: none"> <li>✓ Submit a copy of divorce decree/attorney's certification of separation.</li> <li>✓ Submit a SIGNED copy of the 2020 Federal Tax Return (Form 1040 AND applicable Schedules 1, 2 and/or 3) along with copies of all 2020 W-2s and 1099s so that we may separate the tax information. (If there was business income submit Schedule C and/or Schedule K-1 or if there was farm income submit Schedule F.)</li> </ul> <p>**If a 2021 Federal Tax Return has been filed, you may submit the documentation listed above for 2021 instead. **</p> <p>Who Separated/Divorced (circle one): PARENT OR STUDENT Date of Divorce/Separation: ____/____/____</p> <p>For Dependent Students, which parent are you living with/receiving the most financial support from after the separation/divorce: _____</p>
<input type="checkbox"/>	<p><b>Death of Parent or Spouse <u>AFTER Filing FAFSA</u></b></p> <p>*Parent must be a parent that was listed on FAFSA.*</p>	<ul style="list-style-type: none"> <li>✓ Submit a copy of the death certificate or obituary.</li> <li>✓ Submit a SIGNED copy of the 2020 Federal Tax Return (Form 1040 AND applicable Schedules 1, 2 and/or 3) along with copies of all 2020 W-2s and 1099s so that we may separate the tax information. (Note: If there was business income submit Schedule C and/or Schedule K-1 or if there was farm income submit Schedule F.)</li> </ul> <p>**If a 2021 Federal Tax Return has been filed, you may submit the documentation listed above for 2021 instead.**</p> <p>Name of Deceased: _____ Date of Death: ____/____/____</p>

**D. Reason for Appeal Continued (CHECK ALL THAT APPLY)**

<input checked="" type="checkbox"/>	Reason for Appeal	Initial Required Documentation <b>(in addition to the signed statement)</b>
<input type="checkbox"/>	<p><b>2020 or 2021 Significant Medical Expenses</b></p> <p>*This category includes nursing home expenses and/or funeral expenses.*</p> <p>*The expenses must have been paid out-of-pocket and not reimbursed by insurance.*</p>	<p><b>For medical expenses paid in 2020:</b></p> <ul style="list-style-type: none"> <li>✓ Submit a SIGNED copy of the 2020 Federal Tax Return (Form 1040 AND applicable Schedules 1, 2 and/or 3).</li> <li>✓ Submit a copy of Schedule A and B from the 2020 Federal Tax Return (if applicable).</li> <li>✓ Proof of out-of-pocket medical expenses paid out-of-pocket, not covered/reimbursed by insurance in 2020, such as cancelled checks (only required if a Schedule A or B was not filed)</li> </ul> <p><b>For 2021 Significant Medical Expenses:</b></p> <ul style="list-style-type: none"> <li>✓ Submit a SIGNED copy of the 2021 Federal Tax Return (Form 1040 AND applicable Schedules 1, 2 and/or 3).</li> <li>✓ Submit a copy of Schedule A and B from the 2021 Federal Tax Return (if applicable).</li> <li>✓ Proof of out-of-pocket medical expenses paid out-of-pocket, not covered/reimbursed by insurance in 2021, such as cancelled checks (only required if a Schedule A or B was not filed)</li> </ul>
<p>Who Paid the Medical Expenses: _____</p> <p>Total paid out-of-pocket in 2020: _____</p> <p>Total paid out-of-pocket in 2021: _____</p>		
<input type="checkbox"/>	<p><b>One-Time Income Distribution in 2020 (ex. IRA or Pension Distribution)</b></p> <p>*Only check if the distribution/withdrawal was a one-time event that was used for hardship and the funds are no longer available.</p>	<ul style="list-style-type: none"> <li>✓ Provide a detailed description detailing what the one-time income distribution was and what it was used for.</li> <li>✓ Submit a SIGNED copy of the 2021 Federal Tax Return (Form 1040 AND applicable Schedules 1, 2 and/or 3).</li> </ul>
<p>What was the distribution and what were the funds used for: _____</p> <p>_____</p> <p>Were additional funds withdrawn in 2021 or 2022: YES / NO</p>		
<input type="checkbox"/>	<p><b>Other Reason</b></p> <p><u>NOTE: A Special Circumstance will NOT be processed for the following:</u></p> <ul style="list-style-type: none"> <li>✗ Bankruptcy</li> <li>✗ Loss of overtime or bonus pay</li> <li>✗ Loss of income gained through gambling or lottery winnings</li> <li>✗ Private school tuition</li> <li>✗ Non-essential expenses (vacation, tithing, second vehicles, etc.)</li> <li>✗ Standard living or maintenance expenses (utilities, cable bills, credit card payments, cell phone, lawn care, home repair, etc.)</li> <li>✗ Any circumstance experienced by the parent not listed on FAFSA</li> </ul>	<ul style="list-style-type: none"> <li>✓ Additional documentation will be required once we have a better understanding of your special circumstance. Be sure to provide a thorough explanation along with a timeline in your signed statement.</li> </ul>

Student Name: \_\_\_\_\_ USI ID #: \_\_\_\_\_

**E. Projected Income and Resources (COMPLETE THE TABLE BELOW)**

Estimated ANNUAL 2022 Taxable Income	Independent Students Complete these Columns		Dependent Students Complete these Columns for the Parent(s) Reported on FAFSA	
	Student	Student's Spouse (If married)	Father/Step-Father	Mother/Step-Mother
<u>Type of Income and Resource</u>				
Income Earned from Work	\$			
Unemployment Compensation	\$			
Other Taxable Income (Ex. interest/dividend income, social security benefits, severance payments, rental income, alimony, IRA/401K withdrawals, etc.) Please specify: _____ _____	\$			
Estimated ANNUAL 2022 Untaxed Income	Independent Students Complete these Columns		Dependent Students Complete these Columns for the Parent(s) Reported on FAFSA	
<u>Type of Income and Resource</u>	Student	Student's Spouse (If married)	Father/Step-Father	Mother/Step-Mother
Child Support received for all children	\$			
IRA deductions and payments to self-employed SEP, SIMPLE and Keogh	\$			
Payments to tax-deferred pension such as 401(K) or 403(B) plans and savings plans (paid directly or withheld from earnings)	\$			
Untaxed portions of pension distributions or withdrawals (excluding rollovers)	\$			
Living allowances paid to military, clergy and others. Include cash payments and cash value of benefits. Don't include the value of on-base military housing or the value of basic military allowance for housing.	\$			
Veteran non-education benefits such as Disability, Death Pension, or Dependency and Indemnity Compensation (DIC) and/or VA Educational Work-Study Allowance	\$			
Other Untaxed Income not reported elsewhere on this form (Ex. worker's compensation, disability, etc.) Please specify: _____ _____	\$			

**F. Certification and Signature(s) (Typed/Electronic signatures are NOT accepted)**

By signing this form, we certify all the information is true and complete to the best of our knowledge. We agree to document the information reported on this form. We also realize that if unable to provide documentation when asked, the student for whom this form was filed may not receive aid. If dependent, at least one parent must sign this form.

**WARNING:** If you receive federal or state financial aid based on incorrect information, you will have to pay it back. If you purposely give false or misleading information on any financial form, you may be fined \$10,000, receive a prison sentence, or both.

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

**G. Notices**

It is the policy of the University of Southern Indiana to be in full compliance with all federal and state non-discrimination and equal opportunity laws, orders, and regulations relating to race, sex, religion, disability, age, national origin, sexual orientation, or status as a disabled veteran or veteran of the Vietnam era. Questions or concerns should be directed to the Affirmative Action Officer, USI Human Resources Department, University of Southern Indiana, 8600 University Boulevard, Evansville, Indiana 47712.