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2026 - 2027 Special Circumstances - Dependent Student

This form must be submitted by March 1, 2027 for the 2026-2027 academic year.

Occasionally, unusual circumstances exist that may warrant reconsideration of financial aid eligibility. These special circumstances may be either changes that have occurred in your family circumstances since you filed the Free Application for Federal Student Aid (FAFSA) or unusual family circumstances not accounted for on the FAFSA. On the following pages we have listed the circumstances that most commonly qualify a student to file a Special Circumstances request. Select as many circumstances that fit your current situation.

To Qualify for a Special Circumstances Review, You Must:

- Write a letter explaining your particular situation
- Choose one or more of the situations outlined on the following
- pages Complete all pages of this form
- Provide all requested documentation

If your circumstance(s) does NOT fit into one of the options, you may still file the Special Circumstances Form. Please attach a letter explaining your situation as well as any supporting documentation. Please note: Filing this appeal does not guarantee additional financial aid. Some appeals may only result in the student receiving the maximum in subsidized loan eligibility and/or Pell grant eligibility. Please allow 3-4 weeks for processing.

Student Name:	_ Student ID Number: G		
Phone Number:	E-mail:		
complete and correct. All attachments and suppo	nformation reported to qualify for federal student aid is orting documents are true to the best of our knowledge. I misleading information may result in a fine, jail terms, or		
Student Signature:	Date:		
Parent Signature:	Date:		

Please return your completed form to the Office of Financial Aid & Scholarships by fax, U.S. mail, or in person. Be sure to include your name and G Number on all pages. Missing information may delay processing.

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	Loss of Income						
	Reduction or loss of income from work must be for at least ten (10) weeks or sufficient documentation of change and new employment.						
	☐ Parent 1 (father/mother/stepparent) Date of layoff/termination: ☐ Parent 2 (father/mother/stepparent) Date of layoff/termination: ☐ Student Date of layoff/termination:						
	 Has the parent started another job? □ No □ Yes If yes, give start date: If yes, give start date: 						
	 <u>Documentation Required:</u> A letter from employer verifying loss of employment including effective date A copy of the last pay statement showing gross year-to-date income for all jobs worked for both parents 						
	*If more than one employer per parent, please include start/end dates in written statement.						
 Documentation of unemployment benefits from state agency Documentation of severance pay received, or IRA's, stocks, bonds, pensions, etc. converted to cash. A signed copy of your 2024 U.S. Federal Tax Return and/or W2/1099 form(s) 							
	Loss of Child Support						
	Name of Child: Amount received in 2026: Date support ended: Name of Child: Amount received in 2026: Date support ended:						
	Documentation Required:						
	 A copy of legal separation/divorce papers that specifies amount of child support Statement from the Friend of the Court documenting amount of child support 						
	Receipt of One-Time Income						
	Consideration for and one-time income may only be reviewed once during a student's enrollment at Grand Valley State University.						
	<u>Documentation Required</u>:•A signed copy of your 2024 U.S. Federal Tax Return and/or 1099 Form•Written statement explaining reason for early withdrawal						
	Separation or Divorce of Parents since 2024						
	Please note that your parents must be residing in separate households and provide documentation.						
	Date of separation/divorce: Which parent will the student live with or which parent will provide the most financial support?						
	☐Mother/Stepmother ☐Father/Stepfather						
	Documentation Required: •A copy of supporting parent's most recent pay statement; and •A copy of legal separation/divorce papers; and						
_	•Documentation of spousal support and/or child support.						
	Death of a Parent since 2024						
	☐ Mother/Stepmother ☐ Father/Stepfather Date of death:						

Documentation Required:

- A copy of the death certificate or obituary; and
 Describe survivor benefits that are to be received including amounts and payment terms; and

• Surviving parent's 2026 income information.

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Medical or Dental Expenses paid by your family in 2024, 2025, and/or 2026					
Please select the year you wish to claim: \square 2024 \square 2025 \square 2026					
 <u>Documentation Required</u>: Submit a copy of Schedule A—Itemized Deductions from your federal tax return; or Submit copies of supporting documentation as proof of out of pocket payments. 					
 Additional Information: Do not include payments covered by insurance or other resources. Please note: we cannot take into consideration payments made by insurance, unpaid invoices, handwritten confirmations of payments, or explanation of benefits or account statements. 					
Tuition paid out of pocket by your family in 2026					
<u>Documentation Required</u> : •Submit copy of your bill or a letter from the school documenting cost and any scholarship/grant assistance received. The bill must be for the 2026-2027 academic year.					
Other Circumstances not addressed in the above categories					
Documentation Required:					
•Submit a statement that explains changes in your financial and/or family situation. If appropriate, please provide supporting documentation.					

Family Size

Please list the names and ages of all the members of your family* during the 2026-2027 academic year. Also, please indicate which family members (excluding parents) will be enrolled in college at least half-time during 2026-2027 and which institution they are planning to attend. Parents cannot be listed as attending college for this form.

*The term "family" is defined as follows:

For a dependent student, include the parent (and spouse or partner), the student, the parent's dependent children (even if they live apart because of college enrollment), and other people living with the parent now. Include these dependent children and other people only if the people will provide more than half of their support between July 1 and June 30 of the 2026-2027 academic year.

Name	Age	Relationship	Name of College
		Self	GVSU

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Expected Total Income and Benefits

Use this form to document special circumstancefor your parent'shouseholdincomes received to date and to provide your best faith estimate of all sources of income for 2026. Please enter zero to indicate you do not have any types of taxable or untaxed income to report.

All sources of income for 2026	Year To Date 1/1/26 – Today	Estimated Today – 12/31/26
Parent 1 Name: Total Wages, Salaries, Tips	\$	\$
Parent 2 Name: Total Wages, Salaries, Tips	\$	\$
Student Total Wages, Salaries, Tips	\$	\$
Other Taxable Income:	\$	\$
Other Taxable Income:	\$	\$
Student Other Taxable Income:	\$	\$
Other Untaxed Income:	\$	\$
Other Untaxed Income:	\$	\$
Student Other Untaxed Income:	\$	\$
REQUIRED	Parent(s)	Student
As of today, what is the amount of your cash, savings, and checking accounts?	\$	\$
As of today, what is the net worth of your investments, including real estate? Don't include the home in which your parents live. Net worth means current value minus debt.	\$	\$
As of today, what is the net worth of your current businesses and/or investment farms?	\$	\$

Examples of taxable income: Unemployment compensation, taxable portion of Social Security benefits, severance pay, interest income, dividends, capital gains, alimony, pensions, annuities, IRA's, rents, royalties, partnerships, estates, trusts, life insurance payment, early withdrawal from 401k

Examples of untaxed income: Child support received for all children, worker's compensation, veteran's death benefits, disability, living allowances (housing, food, pensions, annuities, etc.) for military/clergy/other

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