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Telephone: 217-351-2222 Fax: 217-373-3807

2022-2023 Special Circumstance Dependent Students

Name	Student ID Number				
costs in the 2022-23 school year. By providing reevaluation of your financial aid eligibility. If you financial situation has changed significantly, pleating the street of the street o	AFSA may not be an accurate indicator of your ability to pay for educational ng documentation of your unusual circumstance, you may qualify for ou do not meet any of the circumstances described below, but feel your ase meet with a financial aid advisor. Each case will be evaluated on an es not guarantee a change in your financial aid eligibility. Only one special c year.				
We are not able to estimate business or seasona only be accepted after you have completed your	al income. For families with this type of income, a special circumstance will 2022 taxes.				
·	and attach all required documents before submitting. You will be contacted cumstance is incomplete, or if further documentation is needed.				
Part 1: General information (required for	r all request types)				
	n for Federal Student Aid (FAFSA) at <u>www.studentaid.gov</u> and review the uestions as asked, even if your current financial situation differs from that				
☐ 2022-23 FAFSA					
Rationale You must provide a typed statement explaining y	our special circumstance situation.				
☐ Typed Statement					
Part 2: Select your circumstance and	attach all required documentation				
☐ Unemployment A parent earned money in 2020, but has since lost t Expected income for 2022 is significantly lower than ☐ Who became unemployed? Parent name: _					
	No ☐ Yes Start date:				
	ting the date employment ended. This <u>must</u> be on company letterhead.				
	atement from each job this parent worked in 2022.				
☐ Current statement of unemployment benefit	Current statement of unemployment benefits indicating weekly benefit amount and total benefits received to date.				

☐ If you do not receive unemployment benefits, sign here (parent signature): ___

☐ Employment Change				
Since 2020, a parent has changed jobs and will earn significantly less in 2022 than they did in 2020.				
☐ Who changed jobs? Parent name: Date of change:				
Letter(s) from the previous employer(s) indicating the date employment ended, or in the case of reduced hours, a letter stating that hours or wages have been reduced and by how much.				
☐ Letter(s) from current employer(s) stating the date employment began, average hours per week and hourly pay rate.				
\square Copy of most recent paystub or earnings statement from each job this parent worked in 2022.				
One-Time Income				
In 2020 a parent received a one-time income, such as a Social Security payment, inheritance, IRA or pension distribution. This income will not be received in future years.				
☐ Who received this income? Parent name:				
\square Statement from the third-party source of the one-time income indicating the payment amount and date paid.				
 □ Typed statement from the recipient of the income. This statement must be specific and detailed, and should include additional documentation, such as receipts, bank statements, etc. The document/s must explain: □ The reason for the one-time payment, and 				
☐ How the funds were spent, including amounts and dates.				
☐ Reduction in Untaxed Income				
A parent received an income benefit (not employment income) for at least 10 weeks in 2020 which has now been lost. Possible examples include Social Security benefits, court-ordered child support, retirement, or disability benefits.				
☐ Who lost the benefit? Parent name:				
☐ Statement of termination or reduction from the source of income, indicating the last date the benefit was received.				
☐ Statement from the source of income indicating the dates the benefit were received, including the amount of benefit received in 2020 and an estimate of benefits (if any) to be received in 2022.				
☐ Medical/Dental Expenses				
In 2020 the student's family paid at least 10% of total income for medical and/or dental care. Payments reimbursed through insurance or Flex Spending accounts, or expenses claimed as a tax benefit will not be considered a special circumstance. Documentation showing medical/dental expenses paid in 2020, including medical bills and receipts.				
☐ Copy of the parent 2020 Federal 1040 tax return, including Schedule A				
Divorce or Separation				
After submission of the 2022-23 FAFSA, parents' divorce or separation has resulted in a reduction of family income. □ For divorce: copy of divorce decree.				
☐ For separation: notarized statement indicating the date of separation.				
☐ For separation: documentation demonstrating two separate households, such as lease(s), mortgage(s), or utility bill(s).				
☐ If a joint Federal tax return was filed in 2020, submit copies of 2020 W-2 forms for both parents.				
□ Death				
After submission of the 2022-23 FAFSA, a supporting parent has died.				
☐ Copy of death certificate.				
☐ If a joint Federal tax return was filed in 2020, submit copies of 2020 W-2 forms for both parents.				

Part 3: Estimate your family's expected 2021 income

Provide estimates of your family's expected income for the 2022 tax year. This includes income you or your parents have already received (year to date income) and income that you expect to receive through the end of the year (estimated income). Include both taxable and untaxed income.

			YEAR TO DATE ESTIMATED INCOME From 1/1/22 to 12/31/22	
Student income from work			\$	
Parent 1 (Name) income from work		\$	
Parent 2 (Name) income from work		\$	
Unemployment benefits			\$	
Child support received			\$	
Worker's Compensation			\$	
Social Security benefits			\$	
Other untaxed income, such as	housing, food, and other living allowance	s		
from military, clergy, and others			\$	
my knowledge. If asked by a	e information on this form and the att n authorized official, I agree to give a nor include a copy of a federal or state ance will not be reviewed.	dditional proof of the info	rmation that I have given on this	
Student Signature		 Date		
Parent Signature		Date		
OFFICE USE ONLY				
O APPROVED O DENIEI	O NO ACTION TAKEN			
Staff Signature		Date	Date	
Notes				
				

Parkland College ensures equal educational opportunities are offered to all students regardless of race, color, national origin, gender, disability, sexual orientation, veteran/Vietnam veteran era, age, or religion, and is Section 504/ADA compliant. For additional information or accommodations call 217-351-2505.