



## 2019 - 2020 Financial Aid Special Consideration Form

**Name**

Last	First	MI
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**ID**

**Phone Number**

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The *Special Consideration Form* may be used by you and your family to report unusual circumstances not addressed on the Free Application for Financial Federal Student Aid (FAFSA) that you believe affect your ability to contribute to your education at Eastern Shore Community College (ESCC). These circumstances may be conditions that are negatively impacting your 2019 finances when compared to the 2017 income reported on your 2019-2020 FAFSA or adversely affect your current income due to extraordinary expenses that provide you with less available income. **Before the Financial Aid Office can review the information on this form, you must have filed a 2019-2020 FAFSA, completed the verification process if you were selected and been initially awarded financial aid.**

The information provided on your original FAFSA may not be updated if your income reduction is not significant or appears inconsistent. Likewise, expenses for consumer goods and lifestyle choices may not be supported with additional financial aid resources.

1. Please check the reason for your special consideration request and attach the required documentation. Incomplete forms that do not include the required documentation will **not** be considered. Please note the Financial Aid Office reserves the right to request additional documentation, if needed.
  - A. **Unusual medical and/or dental expenses that were incurred during the tax year provided on the FAFSA.** *Documentation Needed:* Copy of 2017 Federal income tax return and associated Schedule A and/or medical receipts and Explanation of Benefits form.
  - B. **Death, divorce, or separation has occurred since the FAFSA was filed.** *Documentation Needed:* Copy of death certificate or divorce/separation decree.
  - C. **Loss of unemployment compensation.** *Documentation Needed:* Letter from unemployment office stating start/end dates and benefit amount.
  - D. **Loss of child support.** *Documentation Needed:* Letter or court document stating start/end dates and child support amount.
  - E. **Loss of Worker's Compensation benefits.** *Documentation Needed:* Letter from Bureau of Worker's Compensation stating start/end dates and benefit amount.
  - F. **Loss of income of parent and/or student (spouse, if applicable) from work due to layoff, closing of business, termination, or reduction in employment hours to attend school.** *Documentation Needed:*
    - Signed copy of 2017 Federal tax return including all schedules and W2 statements (if you submitted a signed copy of your 2017 Federal tax return previously, you do not need to resubmit them).
    - Letter from previous employer documenting effective dates and severance, vacation, personal and sick leave pay out.
    - Copy of final pay stub from previous job, if applicable.
    - Letter from unemployment office documenting effective dates and benefits received.
    - Copy of most recent pay stub from current job, if applicable.
    - Documentation of any other income received during the calendar year.



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2. Please explain in detail the unusual or special circumstance that you were unable to address when completing the Free Application for Federal Student Aid (FAFSA) for the 2019-20 year. Please be as descriptive as possible. If additional space is needed, please attach separate paper and be sure to include your name and EMPLID number on the attachment.

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3. Please provide the amount that you and your family expect to receive between January 1, 2019 and December 31, 2019. If your parent is divorced, separated, or widowed, do not include information about the other parent. If you are divorced, separated, or widowed, do not include information about your spouse.

Income	Source	Amount
Income Earned from Work	Last paycheck stub, W-'s, tax returns, letter from employer	\$
Other Taxable Income	Dividends, interest, pensions, alimony, annuities, 401K, severance package, etc.	\$
Child Support	Letter from child support enforcement, court order	\$
Other Untaxed Income	Letter from agency providing resources (TANF, Worker's Compensation, Social Security Benefits)	\$
Unemployment benefits	Virginia Employment Commission statement	\$

*My signature certifies that the information in this appeal is true and correct and that I am providing an accurate description of my financial situation. I understand that purposely giving false or misleading information could result in a fine, imprisonment or both as it relates to my reporting information to the U.S. Department of Education. I understand that the Eastern Shore Community College Office of Financial Aid reserves the right to request additional information. I will notify the ESCC Office of Financial Aid immediately if circumstances change.*

\_\_\_\_\_ Student's Signature

\_\_\_\_\_ Date

\_\_\_\_\_ Parent's Signature

\_\_\_\_\_ Date

A parent's signature is only necessary when you were required to provide information about them on your 2019-2020 Free Application for Federal Student Aid (FAFSA).

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FOR OFFICE USE ONLY

Reviewed by Coordinator:

Accepted or Denied