

**2023-2024 Special Circumstances Form – Independent Student (2022 Income)**

This form is for **independent** students (who were **not** required to provide parent information on the FAFSA) who experienced a reduction in income and/or incurred unusual expenses in 2022.

The U.S. Department of Education grants authority to Financial Aid Administrators to make adjustments on a case-by-case basis to the data elements used in the FAFSA expected family contribution (EFC) calculation in order to reflect more accurately the financial need of students and families with special circumstances. In making these case-by-case determinations, the school must obtain documentation that supports and substantiates the reason(s) for any adjustment. **Please read the instructions carefully and include any additional documentation that is requested, along with a signed copy of your 2022 income tax returns(s).** Fill out each section that applies to you. Note that not all changes will result in additional aid eligibility.

**Section A: Student Information**

Student Last Name: \_\_\_\_\_ Student First Name: \_\_\_\_\_ NU Student ID: \_\_\_\_\_

**Section B: Explanation of Special Circumstances**

In the space provided below, please explain your request for special consideration. Be as detailed as possible in your explanation and include specific dates whenever possible. You may attach an additional sheet of paper if more than the allotted space is needed. Some examples of special consideration include:

- Loss or reduction of employment or income/wages (include the **date** in which the employment loss and/or other loss of income occurred).
- Loss of wage earner due to death, divorce, or separation.
- Termination or reduction of child support, alimony, assets, or Social Security Dependent Survivor Benefits.

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**Section C: Required Items to Submit**

If you or your spouse had a reduction in income for 2022, submit the following items along with this form:

- A signed copy of the **2022** income tax return(s) and schedules for both you and your spouse (if married)
- Most recent earnings statement(s) and/or paystub(s) for both you and your spouse (if married)
- Documentation of other income received for both you and your spouse (if married)

Once you have gathered the required documents, **proceed to complete Section D.**

**Section D: Income Earned in 2022**

If you or your spouse had a reduction in income for 2022, complete the table below. Enter \$0 for any income not received in 2022.

Taxable/Non-Taxable Income & Benefits for 2022 (from January 1, 2022 – December 31, 2022)		
Income for 2022	Student	Spouse (if married)
Income Earned from Work <i>(non-tax filers attach copy of all W-2 and/or 1099 forms)</i>	\$	\$
Other Taxable Income <i>(do not include unemployment income)</i>	\$	\$
Untaxed Social Security Benefits	\$	\$
Child Support Received	\$	\$
Earned Income Credit	\$	\$
Military/Clergy Allowance <i>(housing, food, living allowances paid to military/clergy)</i>	\$	\$
Payments to Tax-Deferred Pension and Retirement Plans	\$	\$
Other Untaxed Income	\$	\$
<b>Totals</b>	<b>\$</b>	<b>\$</b>

**Section E: Unusual Expenses**

If you or your spouse had unusual expenses in 2022, check the appropriate box(es) and complete the section below (Section E).  
**If this section does not apply, leave blank and proceed to Section F.**

- Unusual Medical & Dental Expenses**  
 Amount paid out of pocket for medical/dental expenses not covered by insurance in 2022: \$ \_\_\_\_\_
- Elementary & Secondary Education Tuition for 2022 calendar year** (does not include college expenses)  
 List the amount of elementary and/or secondary school tuition that you will pay for your dependent child(ren) to attend school during the 2022 calendar year. Do not include amounts covered by scholarships or waivers.

Child's Name	Age	Name of School	Amount of Tuition in 2022
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____
_____	_____	_____	\$ _____

- Unusual Expenses**  
 List the amount of any other unusual debts or expenses for which you or your spouse paid in 2022 (such as elderly dependent care, disabled family member, etc.). Do not list consumer debt for discretionary purchases or services.

Type of Expense	Expense Paid By	Amount Paid in 2022
_____	_____	\$ _____
_____	_____	\$ _____
_____	_____	\$ _____

**Section F: Signature(s)**

By signing this worksheet, I/we certify that all the information reported on this worksheet is complete and correct.

Student Signature \_\_\_\_\_ Date \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

**\*\*This form must be signed and dated in order to be processed\*\***  
**Note: Special Circumstance Forms may take up to four weeks to process.**