The Financial Aid Office recognizes that a family can experience a change in financial circumstances which make it necessary to re-evaluate an aid application. Before consideration, the student must have submitted a 2024-25 Free Application for Federal Student Aid (FAFSA) and the results must be on file. Also, if selected, the federal/state verification process must be finalized prior to additional changes.

In addition to the required documents to support the request listed within the appropriate sections below, it is recommended that the student and/or parent write a letter describing the extenuating circumstances which have affected their ability to pay for college.

### STUDENT INFORMATION

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
<th>SPIRIT ID Number</th>
<th>Parents’ Signature:</th>
</tr>
</thead>
</table>

**Unemployment** of a parent, independent student or student’s spouse due to termination, disability, retirement or layoff.

Name of unemployed person: _____________________________ Relationship to student:________________

Date of unemployment: ___/___/___ Weekly amount of Unemployment Benefits: $__________

What is the **total** amount of severance or vacation pay, if any, to be received in 20____? $__________

Has this person returned to work?     Yes      No        If yes, indicate date: ___/___/___

If yes, indicate **monthly** gross income from new job: $__________

**Documentation Requirements:**
- Copy of “Notice to Claimant of Benefit Determination” from unemployment office.
- Notice of termination from former employer with indication of last date of employment.
- Last pay stub(s) from former employer
- Verification of retirement or medical disability

**Divorce or Separation** of student or student’s parents

Date of Divorce or Separation: ___/___/___ Name of parent student lives with? __________________________

Indicate **weekly** amount of support received by this parent:

Child Support (for all children): $__________  Alimony: $__________  Household Support: $__________

**Documentation Requirements:**
- Divorce decree or legal separation document
- If legal papers are not available, submit verification of differing addresses. This may be driver’s licenses, utility bills, signed lease, employer verification, car insurance bill, etc.

**Death** of parent or spouse

Name of deceased person: _____________________________ Date of Death: ___/___/___

Date Social Security Benefits began: __________ Monthly amount for all family members: $__________

**Documentation Requirements:**
- Death certificate, obituary notice or bill from funeral home

**Loss of Untaxed Income or Benefits**: social security, child support, pension, etc.

Person who lost benefits: _____________________________ Type of benefits lost: _____________________________

Date benefits lost: ___/___/___ Total received 20___: $__________ Total received in 20___: $__________

**Documentation Requirements:** Statement from agency which terminated benefits.
**Student Loss of FULL-TIME Work** (Student worked at least 35 hours a week for at least 30 weeks in 20___, but is no longer working full-time).

Applicant is currently working part-time or unemployed.
Reason for change in employment status: ________________________________
If working part-time, what are the expected wages for 20___? $__________ If unemployed, please answer all questions in the Unemployment section above.

**Note that the following conditions will NOT be considered:**

- Parent and/or step-parent unwilling to provide information on a financial aid application and/or to assist in paying for college.
- Unusual expenses related to consumer debt, such as, credit card debt, car or insurance payments, mortgages, income or real estate taxes.
- Families with prior Special Conditions who underestimated their income
- Reductions in pay due to voluntary overtime
- Bankruptcy proceedings