



Hanover College Financial Aid
Special Circumstance Petition for 2023-2024

Federal regulations require the Office of Financial Aid to use 2021 financial information from the FAFSA when determining financial need for the 2023-2024 school year. This form may be used if you feel that the FAFSA does not adequately reflect your financial condition.

Complete all four sections of this petition and return it to the Office of Financial Aid with all required documentation. Please allow up to 6 weeks for processing this petition. NOTE: If documentation is not submitted with this petition, your request cannot be processed.

Section 1: Student & Parent Information

Student Name (Last, First, M.I.)

Student ID Number or Last Four of SSN

Parent/Stepparent Name (Last, First, M.I.)

Parent Email Address

Parent/Stepparent Name (Last, First, M.I.)

Student Email Address

Section 2: (please check all that apply)

Loss of income due to non-disability related unemployment - Student, spouse, or parent(s) has lost employment (due to layoff, termination, or involuntary resignation) since the last tax year reported on most recent FAFSA. Complete lines 1 through 4.

Loss of income due to disability or natural disaster - Student, spouse, or parent(s) has not been able to earn money the way it was earned in the last tax year reported on the FAFSA. This must be due to a disability or natural disaster that occurred since the end of the last reported tax year. Complete lines 1 through 3 and line 5.

Loss of untaxed income or benefits - Student, spouse, or parent(s) has lost untaxed earnings (such as child support, Worker's Compensation, etc.) since the last tax year reported on most recent FAFSA. Complete lines 1 through 3 and line 6.

1. Who has been out of work or lost income or benefits? Name: Relationship to student:

2. Dates of unemployment: from to

3. Complete Section 3 - Estimated Income

- 4. Acceptable Documentation for loss of income due to non-disability related unemployment: Evidence of loss of employment (such as a termination notice or signed official letter from employer on company letterhead) or proof of bankruptcy and financial statements (self-employed only) AND Copy of unemployment documentation (or letter stating that unemployment was denied) AND Copy of 2021 and 2022 Federal Income tax return transcript (Parents) AND Copy of 2021 and 2022 W2(s) (Parents) AND Enclosed 2023-24 Verification Worksheet.

- 5. Acceptable Documentation for loss of income due to disability or natural disaster: Evidence of loss of earnings (such as a signed letter from employer on company letterhead) AND Copy of 2021 and 2022 Federal Income tax return transcript (Parents) AND Copy of 2021 and 2022 W2(s) (Parents) AND Enclosed 2023-24 Verification Worksheet AND State Disability benefit approval/denial letter AND/OR Employer Disability benefit approval/denial letter AND/OR Workers Compensation benefit approval/denial letter AND/OR Private Carrier benefit approval/denial letter.

- 6. Acceptable Documentation for loss of untaxed income or benefits: Evidence of loss of untaxed income or benefits (court decisions, letters of denial of benefits) AND Copy of 2021 and 2022 Federal Income tax return transcript (Parents) AND Copy of 2021 and 2022W2(s) (Parents) AND Enclosed 2023-24 Verification Worksheet.

_____ **Occurrence of one-time income** – Student, spouse, parent(s) received a one-time lump sum (such as inheritance, retirement, IRA distribution, etc.) that was report on the 2023-24 FAFSA but is not expected in the future.

1. Who received the one-time income? Name: _____
Relationship to student: _____
2. Acceptable Documentation:
 - Official evidence of one-time income (legal forms, financial statements, etc.) **AND**
 - Signed statement that identifies the source of income and how the funds were spent or invested **AND**
 - Documentation supporting how the funds were spent or invested **AND**
 - Copy of 2021 and 2022 Federal Income tax return transcript (**Parents**) **AND**
 - Copy of 2021 and 2022 W2(s) (**Parents**) **AND**
 - Enclosed 2023-2024 Verification Worksheet.

_____ **Separation or divorce** – Student (or your parents, if dependent) have separated or become divorced since the time the FAFSA was filed.

1. Date of divorce or separation: _____
2. Name of Primary (Custodial) Parent (after separation or divorce): _____
3. Number of family members remaining in household: _____ Number in college: _____
4. Acceptable Documentation:
 - Legal documentation of separation or divorce (such as court decisions or divorce decree) **AND**
 - Copy of 2021 and 2022 Federal Income tax return transcript (**Primary (Custodial) Parent, including Stepparent(s) and Student**) and W2s (**Parents**) **AND**
 - Enclosed 2023-24 Verification Worksheet.

_____ **Death** – Your spouse (or parent, if dependent) received income for the most recently reported tax year, but passed away after you completed the FAFSA.

1. Name of deceased: _____
2. Relationship to student: _____ Date of death: _____
3. Number of family members remaining in household: _____ Number in college: _____
4. Acceptable Documentation:
 - Legal documentation of death (such as a copy of death certificate) **AND**
 - Copy of 2021 and 2022 Federal Income tax return transcript (**Parents**) **AND**
 - W2s (**Parents**) **AND**
 - Enclosed 2023-24 Verification Worksheet.

_____ **Elementary or secondary tuition costs** – You or your parents are paying elementary and secondary tuition costs during the 2023-2024 school year for dependent children.

1. Acceptable Documentation:
 - Written contract that states the amount of tuition paid or due for the 2023-2024 school year **OR**
 - Signed letter from the school stating the amount of tuition paid or due for the 2023-2024 school year on official school letterhead **AND**
 - Copy of 2021 and 2022 Federal Income tax return transcript (**Parents**) **AND**
 - Copy of 2021 and 2022 W2(s) (**Parents**) **AND**
 - Enclosed 2023-24 Verification Worksheet.

_____ **Medical or dental expenses** – You or your parents paid medical or dental expenses not covered by insurance that exceeds 10% of your income during 2018.

1. Acceptable Documentation:
 - Copy of 2021 and 2022 Federal Income tax return transcript (**Parents**) **AND**
 - Copy of 2021 and 2022 W2(s) (**Parents**) **AND**
 - Enclosed 2023-24 Verification Worksheet **AND**
 - Copies of cancelled checks used to pay out-of-pocket medical or dental expenses **AND/OR**
 - Confirmation of amount paid out-of-pocket by you during 2021 and purpose of expense (**amounts billed will not be considered without proof of payment**).

Other – Circumstance not otherwise listed: _____

Effective Date: _____

1. Please attach a letter explaining the situation you wish to have reviewed.
2. Copy of 2021 and 2022 Federal Income tax return transcript (**Parents**), Copy of 2021 and 2022 W2s **AND** enclosed 2023-24 Verification Worksheet.

Section 3: Estimated Income

Please provide the following information (estimates are acceptable) for the current calendar year:

	Father/Stepfather	Mother/Stepmother
Earnings from work: January 1 to present:		
Est. Earnings from work: present to December 31:		
Other Taxable Income:		
Interest:		
Pensions:		
Unemployment:		
Other:		
Social Security Benefits:		
Child Support Received:		
Other Untaxed Income:		
Earned Income Tax Credit:		
Welfare:		
Housing Allowance:		
IRA/Keogh Payments:		
Other:		
Total:		

Section 4: Certification Statement

I/We certify that the information on this form is true, complete, and correct to the best of my/our knowledge. I/We understand that false statements or misrepresentations are cause for denial, reductions, withdrawals, and/or repayment of financial Aid. I/We also understand that this information will be used in accordance with Federal guidelines and may or may not result in adjustments to the student's financial Aid eligibility.

Student's signature

Date

Parent's signature

Date

Submit Forms

Electronically:

<https://my.hanover.edu> Administration – Financial Aid – Upload Documents (link on left of screen) or

Postal Mail:

Hanover College Office of Student Financial Services
517 Ball Drive
Hanover, IN 47243

Contact Information:

Email: financialservices@hanover.edu
Fax: 1-812-766-7284
Phone: 1-800-213-2178

OFFICE USE ONLY

SSACI PJ Code: _____

SCPJ: _____ DO: _____ Approved: _____ Denied: _____

Original PC: _____ New AGI: _____ Medical/Legal PJ: _____

Original EFC: _____ New Tax Paid: _____ 7.5% of Original AGI: _____

Original AGI: _____ New PC: _____ Med Exp Doc: _____
(amount must be more than 7.5%)

Original Tax Paid: _____ New EFC: _____ Sch A Med: _____

Original Tax Rate: _____ %
Exp Doc – Sch A: _____
(must be positive to continue review)

Changes in Awards: _____

PowerFAIDS Actions:

- Verification Completed
- AGI Adjusted and Locked (FM Data>Parent Financial/Student Financial Screen)
- Taxes Adjusted and Locked (FM Data>Parent Financial/Student Financial Screen)
- Request EFC Adjustment and Lock (FM Data>Data Resolution Screen)
- Data Released (FM Data>Data Resolution Screen)
- Comment Made/Document Tracking "Approved"
- Aid Adjusted and Applied (Packaging>Awards Data Screen)

Director's Signature

Date