

***Unusual Circumstances Form
2009-2010***

Use the attached form to report unusual circumstances or changes in your family's and/or your financial situation, which may impact your ability to pay for your education. We review circumstances on a school year time frame, thus we will only consider situations that exist between or affect the time frame of July 1, 2009 – June 30, 2010. We must have a complete FAFSA on file before we can re-evaluate your financial aid package. Please **complete all relevant sections of the attached form, attach documentation requested**, and return to the Financial Aid Office. Documentation requested is required. If you do not provide the requested information, your request for an exception will be declined. Feel free to attach any statement to explain your individual situation in more detail.

*** * Adjustments made by the Indiana Wesleyan University Financial Aid Office are reviewed on a case by case basis, not guaranteed, and affect aid eligibility while a student is enrolled only at IWU. The exception you receive from IWU does not apply at other colleges or universities nor do their decisions apply at IWU. * ***

Below are the areas that the Indiana Wesleyan University Financial Aid Office has determined as unusual circumstances followed by a general description.

Death of Parent/Spouse	Divorce or Legal Separation	One Time Income	Loss of Social Security or Child Support
Loss or Change of Job	Excessive Medical Expenses	Tuition Payments	Natural Disaster

Death of Parent/Spouse

The death of one or both parents of a dependent student OR the spouse of an independent student.

Divorce or Legal Separation

The parents of a dependent student who either divorce or are legally separated. Not available to an independent student due to federal regulations prohibiting changes to a student's marital status after the FAFSA is completed.

One Time Income

Because the FAFSA takes a snapshot of a family's financial resources based on the most recent tax calendar year, a situation may arise where the snapshot contains an income item that is not a normal annual occurrence. An example may be a bonus paid by an employer. *Voluntary withdrawals from pension or retirement funds will not be considered.*

Loss of Social Security or Child Support

At the point the FAFSA was filed, the student or parent(s) may have been receiving either social security payments or child support that will not continue when the student enters college or reaches a certain age.

Loss or Change of Job

One or both parents, the student, or the student's spouse lose or change jobs after the filing of the FAFSA. If an adjustment is made to aid eligibility because of a job loss, 15 weeks following the adjustment, documentation will be required confirming the continued lack of employment.

Excessive Medical Expenses

Consideration is given to a family's payment of excessive medical expenses not covered by their insurance. Information for determining what costs are acceptable and what costs are excluded can be found in the IRS tax form 1040, schedule A instructions. We cannot consider COBRA, insurance premium payments or amounts billed but not paid.

Tuition Paid

Consideration is given to tuition payments for a student's siblings attending private elementary, junior high, or high school. Consideration is also given for one or both parent's tuition payments at an accredited college or university.

Natural Disaster

The family has faced the events of a natural disaster, which changes the financial resources listed on the FAFSA. Consideration is given to the loss of resources not covered by insurance.

Unusual Circumstances Form 2009-2010



Student Name _____ ID# _____

Social Security Number _____

Complete the required information indicated under the heading of the unusual circumstances considered by the Indiana Wesleyan University Financial Aid Office. **All documentation requested is required!** Sign and date the form and send it to the Financial Aid Office at the address listed.

Death of Parent/Spouse:

1. Date of death (mmddccyy) _____
2. List on the chart below the actual and/or expected monthly gross income of the remaining parent (dependent student) or yourself (independent student). Attach documentation of actual and/or calculations for expected income. If a dependent student loses both parents, contact the financial aid office for further instructions
3. Also provide a list of all funds received from any death benefits (life insurance, social security benefits, etc.). Attach documentation of benefits, and what was done with the money received.
4. **All steps must be completed for this circumstance to be considered by the IWU Financial Aid Office.**

MONTH	JULY 2009	AUGUST 2009	SEPTEMBER 2009	OCTOBER 2009	NOVEMBER 2009	DECEMBER 2009	JANUARY 2010	FEBRUARY 2010	MARCH 2010	APRIL 2010	MAY 2010	JUNE 2010
INCOME												

Divorce or Legal Separation:

1. Date of divorce or legal separation (mmddccyy) _____
2. List on the chart below the actual and/or expected monthly gross income of the parent the student is living with the most or who will provide more than half of the student's support. Attach documentation of actual and/or calculations for expected income.
3. List on the chart by month, all monies received or paid for child support. Attach documentation of benefits.
4. List changes in household size. Household size was: _____ Household size is now: _____ Child support was: _____ Paid or _____ Received.
5. **All steps must be completed for this circumstance to be considered by the IWU Financial Aid Office.**

MONTH	JULY 2009	AUGUST 2009	SEPTEMBER 2009	OCTOBER 2009	NOVEMBER 2009	DECEMBER 2009	JANUARY 2010	FEBRUARY 2010	MARCH 2010	APRIL 2010	MAY 2010	JUNE 2010
GROSS INCOME												
CHILD SUPPORT												

One Time Income:

1. Source of one time gross income: _____
2. Indicate the amount of gross monies received \$ _____ Date received (mmddccyy) _____
3. Attach documentation indicating what the family has done with the money received (paying medical or educational expenses may be considered but paying credit card or other outstanding debt will not be considered).
4. **All steps must be completed for this circumstance to be considered by the IWU Financial Aid Office.**



Tuition Paid:

1. Provide the amount of tuition paid or expected to be paid **out-of-pocket** based on a school contract or student's schedule of classes.
2. Attach documentation of tuition payments, tuition contracts, or expected tuition. Make sure the documentation includes the name of the institution to which tuition has been paid.
3. **All steps must be completed for this circumstance to be considered by the IWU Financial Aid Office.**

Natural Disaster:

1. List the event and date of occurrence. Event: _____ Date (mmddccyy) _____
2. Attach documentation detailing the loss incurred that was not covered by insurance, which the family has paid out of pocket.
3. **All steps must be completed for this circumstance to be considered by the IWU Financial Aid Office.**

I certify the information provided is complete and true to the best of my knowledge. If there are changes to our situation, I agree to notify the IWU Financial Aid Office. I understand that any changes made to my eligibility, based on the information provided above only affects the aid received at Indiana Wesleyan University.

Student _____

Date _____

Parent/Spouse (if applicable) _____

Date _____

Return to:

Financial Aid Office ~ Indiana Wesleyan University ~ 4201 S. Washington St. ~ Marion ~ IN ~ 46953-5279

866-468-6498 ~ 765-677-2116 ~ FAX 765-677-2809