

Financial Aid Office Missoula, MT 59812-2232 Phone: (406) 243-5373 Fax: (406) 243-4930

finaid@umontana.edu

## Special Circumstance Request – Student Income Reduction 2021-2022 Year (Autumn 2021, Spring/Summer 2022)

Student Name:	UM ID#: <u>790-</u>
UM E-Mail:	Phone#:
Eligibility for fir	nancial aid is based on the 2019 tax year which may not be indicative of a family's continuing ability to pay
$for \ a \ student's$	educational expenses. To remedy this, Congress has authorized the school's financial aid administrator to
evaluate specia	Il circumstances on a case-by-case basis with adequate documentation. To begin an appeal, return this
form (front and	back), provide a personal statement, & any supporting documentation to the Financial Aid Office. Please
contact our off	ice for help completing this form or with any questions you may have about your personal circumstances.
1. Check the k	box that best describes the tax year in which the loss of income occurred:
□ Studen  ○	t and/or spouse 2020 annual income is lower than 2019 annual income, submit the following: Signed copy of student (and spouse's, if married and filed separate tax returns) 2020 federal tax return Complete sections B & C of <u>Student Income Information</u> (section 3 below)
□ Studen  o  o	t and/or spouse 2021 annual income is lower than 2019 annual income, submit the following:  Please complete <u>all</u> sections of <u>Student Income Information</u> (section 3 below)  Provide copies of year-to-date paystubs for 2021:
	<ul> <li>Requests given prior to 12/1/21, student (and spouse, if married) must provide all year-to-date</li> </ul>

student's (and spouse, if filing separately) 2021 federal tax return.

Note: If income reduction is due to a job loss or layoff, please provide documentation of last date of employment. Additionally, you must wait until 3 months *after* the event occurred to submit an appeal to allow time for the documentation to display current income level (i.e. unemployment, new job, etc.).

Requests that are reviewed 12/1/21 or later will be reviewed using a signed copy of the

2. Write a detailed personal statement of the special circumstance(s) on a separate page and submit with this form.

statements (with a minimum of 3 consecutive months' documentation).

3. Complete the Student Income Information table below - Please do your best to give estimates for the total income sources for the year indicated below. If needed, multiply the dollar amount by the appropriate number of weeks/months/paychecks to determine the gross amount to the list below (e.g., \$1,000 x 12 months = \$12,000). If a line item is left blank, you are certifying you have not received and there is not possibility of receiving income of that kind.

> Documentation must be included for each of the items you list a value greater than "\$0".

Expected Income Sources for (please indicate year):  2020 (1/1/2020 – 12/31/2020) - OR - 2021 (1/1/2021-12/31/2021)	Student	Student's Spouse (if student is married)
Section A: Taxable Income – *If requesting review for 2020 tax year skip section A.*		
Earned Income from Work (attach copy of most recent paystub(s))	\$	\$
Unemployment Compensation (Gross)	\$	\$
Severance Package/ Retirement Benefits	\$	\$
Alimony Received	\$	\$
Business, Farm or Rental Net Income	\$	\$
Investment Income: Dividends, Interest, Net Rental Income, etc.	\$	\$
Capital Gains (Sale of Property, etc.)	\$	\$
Taxable Social Security or Welfare	\$	\$
IRA/Retirement Account Withdrawals (not included Rollovers)	\$	\$

ensions and Annuity Income	\$	\$
Corporation & Partnership Income	\$	\$
ection B: Untaxed Income		·
hild Support received	\$	\$
ax Exempt Interest Income	\$	\$
Intaxed portions of Pension and Annuity Income	\$	\$
Other Untaxed Income: Worker's Compensation or Disability (not Social Sec.)	\$	\$
Ion-Educational Veterans Benefits (Exclude GI Bill Benefits)	\$	\$
ayments to tax-deferred pensions and savings	\$	\$
RA deductions & payments to self-employed SEP,SIMPLE,KEOG or other plans	\$	\$
Intaxed portions of IRA distributions	\$	\$
Ailitary/Clergy Housing Allowance paid to you	\$	\$
ny other income (please itemize)	\$	\$
ection C: Additional Financial Information		
hild Support Paid	\$	\$
limony Paid	\$	\$
axable Earnings from Need-Based Work-Study	\$	\$
Student Grants or Scholarships Reported to IRS		\$
Taxable Combat Pay or Special Combat Pay		\$
<b>Notifications:</b> For all dependent students, notification of requests for add of the completion of review, will be sent only to the UM student email accomposition to be shared with their parent, they will need to forward requests.	ount. If a studer	

reviewing any special circumstance requests. In order to allow for sufficient time for the student and families to provide necessary documentation, the review of these requests will begin on <a href="May 1st">May 1st</a>, 2021 and will be reviewed in the order they are received. <a href="Please note">Please note</a>: that if the student is selected for verification based on their FAFSA application (which utilizes 2019 income), that review must be completed <a href="before">before</a> the special circumstance can be reviewed.

Due to the volume of these requests you may experience a notable delay from the date your request is submitted to the date it is reviewed, as these can take up to 4-6 weeks for processing. As a result, it is recommended for those students submitting an appeal less than 2 months before the start of a semester to accept what funds they are comfortable with from the awards listed in their original Financial Aid Offer. This accepted funding will assist with completing the payment process in Cyberbear. Then once the special circumstance appeal is processed, if the student is eligible for increased and/or better types of aid, those aid sources will be retroactively applied.

All requests and supporting documentation must be submitted by the 1<sup>st</sup> day of the final month of the semester for which the student is enrolled. For example: an autumn semester request must have all forms and documentation submitted by December 1<sup>st</sup>.

best of my knowledge and that I understand this request me professional judgment of the UM Financial Aid Office staff. Any decision is final and applies <i>only</i> to UM. I also acknowl lower a student's Expected Family Contribution (EFC), it may been offered. Please note: if you purposely give false or me	pecisions are made annually and on a case-by-case basis
Any decision is final and applies <i>only</i> to UM. I also acknowl lower a student's Expected Family Contribution (EFC), it may	•
lower a student's Expected Family Contribution (EFC), it ma	age that while a change in financial circumstances may
•	,
hean affered Please note: if you nurnosely give false or m	not result in a change to the financial aid I have already
been offered. Fiease flote. If you purposely give raise of fire	leading information, you may be fined \$20,000, sent to
prison, or both (FAFSA: pg. 8, Step Seven, U.S Department	Education).

Date

Student signature