

STUDENT SERVICES CENTER 235 North National Avenue PO Box 1940 Fond du Lac, WI 54935-1940 920-924-3207 1-800-472-4554 financialaid@morainepark.edu

2015-2016 Special Condition Review Form

Follow the steps below and return this form with the appropriate documentation. The information you provide on this form will be reviewed to determine if adjustments to your FAFSA can be made. Please allow 3 to 4 weeks for processing time. Additional information may be requested once received. All decisions made by the Financial Aid Office are final. If a change is made, you will receive a revised Student Aid Report (SAR) from FAFSA. The Financial Aid Office will then revise your award. You will receive notification if we are unable to process this request. **Do not submit this form before completing your 2015 Federal Tax Return.**

- Attach a detailed letter to this Request Form documenting your circumstances.
- Attach documentation requested in Section B for the special circumstances you checked.

Section A – S	tudent Information						
Name:		Student ID N					
Student phone	number:						
	in your household, including yoursel ge at least half-time between 0			ber (excluding parents) who will			
Full Name		Age	Relationship	College			
			Self	Moraine Park			
financial situatio	pecial Circumstances—from the on and provide indicated documentat Job or Parental Loss of Job or Reduction Letter(s) from applicable former emplo Attach a signed copy of your and your Verification Worksheet (Dependent or form can be found at www.morainepaparents imported your tax data from the can be seen to see the can	tion. of Hours byer(s) stating the parents' (if deper Independent) back.edu/financial	last date of employment. ndent) 2014 Tax Return Transci ased on whether you needed pa aid/, click on Financial Aid Forr	ript from the IRS and W-2s and a arent's tax information on FAFSA. This ns to locate). If you and/or your			
Loss of 1. 2. 3. 4.	 Copy of divorce decree indicating the last date of child support. Copy of unemployment compensation letter or signed statement that you did not or will not receive unemployment. 						
One tim	ne income in 2014 (i.e., Sale of home, cap Attach a <u>signed</u> copy of <u>your</u> and your Worksheet (Dependent or Independent found at www.morainepark.edu/finar	parents' (if depent) based on whe ncial-aid/, click or	ther you needed parent's tax in n Financial Aid Forms to locate)	formation on FAFSA. This form can be			

You and	your spouse or	your parents (if depend	ent) have been separated or	divorced since completing the FA	FSA.					
		Date of Separation or D	Divorce							
1. 2.	Attach a <u>signe</u> Worksheet (D found at www	<u>d</u> copy of <u>your</u> and your ependent or Independe v.morainepark.edu/fina	nt) based on whether you ne	4 Tax Return Transcript and W-2s a eded parent's tax information on Aid Forms to locate). If you and/or	FAFSA. This form can be					
Your spo	ouse (or a paren	t) has died since comple	eting the FAFSA.							
		Date of Death								
1. 2.										
Section C – 2015 Income Information										
*Provide a copy of your and your parents (if dependent) signed 2015 Federal Tax Form.										
LIST ALL SOURCES OF UNEARNED INCOME OR BENEFITS:										
(include unemplo			l gains, earned income credi	ts, TANF, Child Support, Social Sec	urity, disability, etc.)					
	ın	come or Benefit		Amount						
Section D – Certification and Signature My signature below certifies that the information I have provided on this form is true. I agree to provide proof of the information if and/or when requested. I understand that the penalty for providing false pr misleading information is a \$20,000 fine, a prison sentence, or both.										
Parent Signature (if applicable): _				Date:					
Student Signature	:			Date:						
Spouse of Student	: Signature (if a	oplicable):			Date:					
Office Use Only										
Reviewer Notes										
Approved: Ye	es No	No Follow Up	Current EFC:	New EFC:						
Reviewer Initials	:	Date:								