

Student Services Center 235 North National Avenue PO Box 1940 Fond du Lac, WI 54936-1940 920-924-3207 1-800-472-4554 <u>financialaid@morainepark.edu</u> Fax (920) 924-3421

2019-2020 Special Condition Review Form

Instructions: A completed Special Condition Review packet should include the following:

- an accepted financial aid award (accepted and verifiable online via myMPTC student account),
- a completed Special Condition Review Form,
- a statement or documentation as required to support your request.

Do not submit this information before completing the Federal Tax Return for the calendar year impacted. You may only submit one year's tax information for review and only one review may be completed in any award year. Fully complete all sections of this form.

Other Information: The information supplied with your 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. You will receive notification if we are unable to process this request. If a change is made, you will receive a revised Student Aid Report (SAR) from the Department of Education. The Financial Aid Office will then revise your award.

Section A. Student Information

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Last Name	First Name	M.I.	Student ID
Phone Number (include area code)			

List the people in your household, including yourself. List the name of the college for any member (excluding parents) who will attend college at least half-time between 07/01/2019 and 06/30/2020.

Full Name	Age	Relationship	College Attending 2019-2020	
		Self	Moraine Park Technical College	

Section B. Student's and Parent's Tax and Other Income Information

1. Provide a copy of your and your parents (if dependent) W-2s and signed 2018 or 2019 Federal Tax Form.

I am submitting information for (check one):

____ 2018 _____ 2019

You may only submit one year's tax information for review.

 Attach a copy of <u>your</u> and your <u>parents'</u> (if dependent) 2017 Tax Return Transcript from the IRS, all W-2s, and a Verification Worksheet (Dependent or Independent) based on whether you needed parent's tax information on FAFSA. This form can be found at www.morainepark.edu/financial-aid/, (click on Financial Aid Forms). If you and/or your parents imported your tax data from the IRS on the FAFSA, we do not need the tax transcript. List all sources of unearned income or benefits for the year for which you are providing tax information (2018 or 2019). Examples include: unemployment compensation, dividends, capital gains, earned income credits, TANF, Child Support, Social Security, disability, etc.

Income or Benefit	Annual Amount

Section C. Special Circumstances

Indicate the reason for the requested review of your family's financial situation and provide indicated documentation.

Loss of job or	parental loss	of job or red	duction of hours
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Suggested Documentation: Letter(s) from applicable former employer(s) stating the last date of employment.

Loss of benefits (Social Security Benefits, Child Support, Worker's Compensation, Alimony, Unemployment Benefits, etc.) Suggested Documentation:

- Copy of benefit termination notice and amount of benefits received in 2018 or 2019.
- 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.

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One time income in 2017 (i.e., sale of home, capital gains, etc.)

Suggested Documentation: Letter explaining the situation and any applicable additional tax documentation.

You and your spouse or your parents (if dependent) have been separated or divorced since completing the FAFSA.

_Date of Separation or Divorce

Required Documentation: Attach a copy of the Separation Order/Agreement or Divorce Decree.

Your spouse (or a parent) has died since completing the FAFSA.

Required Documentation: Attach a copy of the Death Certificate.

Section D. Documentation Required

A detailed letter must be attached to this request form documenting your circumstances

Section E. 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 or misleading information is a \$20,000 fine, a prison sentence, or both.

Parent Signature (if applicable):				Date:		
Student Signa	ature:				Date:	
Office Use O	•					
Reviewer No	otes					
Approved:	Yes	No	No Follow Up	Current EFC:	New EFC:	
Reviewer In	itials:					

Moraine Park Technical College does not discriminate on the basis of race, color, national origin, sex, disability or age in employment, admissions or its programs or activities. The following person has been designated to handle inquiries regarding the College's nondiscrimination policies: Equal Opportunity Officer, Moraine Park Technical College, 235 North National Avenue, PO Box 1940, Fond du Lac, WI 54936-1940, 920-924-6355 or 920-924-3495.