## 2015-2016 Special Circumstance for Dependent Students

| Student's Last Name:   | Student's First Name:   |
|--|---|
| Augsburg ID:   | Student's Phone:  |
| Parent's Last Name:  | Parent's First Name:  |
| Parent's Phone:  | Parent's E-mail:  |
| <ol> <li>Submit your FAFSA to Augsburg.</li> <li>Check the appropriate box below and provide a</li> <li>Attach a written statement explaining your spe</li> </ol>                              | additional documents where requested.                                   |
| My family's 2014 federal tax information does n  | not accurately reflect our 2015 financial situation:                    |
| ☐ In 2015, my custodial parent will no lon  • Include a written statement regarding how mucinclude an annual amount received for siblings  | ch was received monthly and the date that the support stopped. Also     |
| Schedule A.  o If the bills are from 2015, provide an itemized of My family has declared bankruptcy.   | account of the medical costs along with a copy of the 2014 federal 1040 |
| <ul> <li>During 2014, my family had a one-time</li> <li>Provide 2014 W-2s for all parents and the most</li> <li>Provide a written statement about where it is remoney was used for.</li> </ul> |   |
| □ A parent is unemployed and has been for Name of parent: Weekly unemployment compensation: ○ Provide 2014 W-2s for all parents and the most ○ Provide severance package documentation.        | Date of job loss: / /   |
| <ul> <li>A parent has had a reduction in earning</li> <li>Provide 2014 W-2s for all parents and the mos</li> <li>If wages were reduced, include a statement from</li> </ul>                    | st recent paystub(s).   |
| <ul> <li>□ A parent has had an elimination of uner</li> <li>○ Provide 2014 W-2s for all parents and the most</li> <li>○ Provide 2014 unemployment benefit summary.</li> </ul>                  | st recent paystub(s).   |
| <ul> <li>Parent(s) is/are self employed and had a</li> <li>Provide 2014 W-2s for all parents and the mos</li> <li>Include Schedule C (business), Schedule F (far.</li> </ul>                   | st recent paystub(s).   |

## My FAFSA does not reflect my family situation: ☐ I am requesting a dependency over-ride because my parent is unable to file a FAFSA. st Legitimate reasons a parent would be unable to file a FAFSA include abuse, incarceration, or abandonment. A parent being unwilling to file a FAFSA will not be considered. Please provide two letters from objective (such as a social worker, teacher, minister) explaining: 1. How they know the student, 2. Why the parent(s) and the student are estranged and the length of time they have been estranged, 3. How the student is supported financially. ☐ During 2015, my parent is enrolled at least part-time in a degree seeking college program and the cost is not covered by their employer. Include an enrollment verification from the college and a recent student billing statement. ☐ There has been a change to my household size since I filed my 2015-2016 FAFSA. ☐ Separation, divorce or death of a parent. O Please provide a copy of both parent's 2014 W-2s. Please provide legal documentation (legal separation, divorce decree, or death certificate). • Please provide documentation of paid or received spousal support. Complete Table A below ☐ Adoption, birth, or fully supporting additional family members. Complete Table A below TABLE A Change in household size Please complete this table if your household size has changed since you filed the 2015-2016 FAFSA People in Household Relationship **Attending College?** Please make sure you have completed the following steps. Incomplete or unsigned forms will not be evaluated. **1.** Submit your FAFSA to Augsburg. 2. Check the appropriate box above and provide additional documents where requested. 3. Attach a written statement explaining your special circumstance in detail. \*\*\* Each person signing this form certifies that all information reported is complete and correct. \*\*\* Signatures -Student Signature:\_\_ Date:\_\_

Date:

Parent Signature: