2017-2018 Student / Spouse Special Condition Request

<table>
<thead>
<tr>
<th>Student Name:</th>
<th>MTSU ID:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Address:</td>
<td></td>
</tr>
<tr>
<td>Email Address:</td>
<td>@mtmail.mtsu.edu</td>
</tr>
<tr>
<td>Phone:</td>
<td></td>
</tr>
</tbody>
</table>

Financial aid eligibility is calculated based on the information a student provides on the Free Application for Federal Student Aid (FAFSA). For the academic year of 2017-2018, this information includes tax return information, non-taxable income, asset amounts and household information. Many families have changes in their income or family situations that are not reflected in the 2015 information submitted on the FAFSA. Students are able to petition for an adjustment to their FAFSA based on unique extenuating circumstances for either the 2016 or 2017 tax year. MTSU will review the documentation submitted to determine if a student is qualified for a change in their information.

Some of these extenuating circumstances include, but are not limited to:

- Loss or change of employment
- Death of Spouse
- Divorce or separation since FASFA was originally filed
- Unusual out-of-pocket, paid medical expenses
- Loss or change in amount of child support, taxable Social Security, or other taxable benefits.

Circumstances that are NOT considered to be extenuating include, but are not limited to:

- Standard living expenses
- Credit card or other personal debts
- Car payments
- Mortgage payments
- Vacation expenses

If you feel you have an extenuating circumstance and wish to have your information reviewed, you will need to complete the steps below. Requests will not be reviewed until ALL required documentation is received. Submitted documentation will not be returned. Do not submit originals. As your request is being processed, you may be required to submit additional documentation pertaining to your circumstance.

**If you have been selected for verification, you will need to complete the verification process in its entirety before submitting a Special Condition Request.**

**Dependent students:** Answer the questions and submit documentation as they pertain to you only.

**Independent students:** Answer the questions and submit documentation as they pertain to you and/or your spouse.

All requests for review are required to submit the following information, in addition to documentation requested based on your extenuating circumstance. Please initial that you have submitted the required information.

1. Special Condition Request form: Complete all sections of this form and submit any additional documentation requested in each section.

2. Statement: Submit a typed, detailed statement explaining your circumstance. Please include all information pertaining to your circumstance. Your letter must be signed in your handwriting, not electronically signed. You may also be required to explain situations as you complete the form.

3. Tax information: Submit Tax Return Transcripts plus W2’s, 1099, Schedules, K1, etc., used to complete the tax return. You may obtain a tax return transcript by going online to www.irs.gov.

4. Copy of affected person’s last pay stub that shows year-to-date income

5. Copy of non-affected person’s most recent pay stub that shows year-to-date income

6. Circumstance documentation: Submit all required documentation listed for the extenuating circumstance you feel best represents you and your situation.

The Special Condition Request review process takes approximately 3 to 4 weeks* from the time ALL required documentation has been submitted. If your documentation is incomplete or your form is not completely filled out, your appeal will not be reviewed. All decisions made by the MTSU Financial Aid & Scholarships Office concerning special conditions are final. The student will be notified of the decision through their MT e-mail address.

*If you are submitting your appeal during the months of January, May, August or December, the review timeframe may be extended at the discretion of the MTSU Financial Aid & Scholarships Office.
### Section 1: Extenuating Circumstance

*You must submit all required documentation.*

- **Significant loss of income / loss of employment**
  - You (and/or your spouse) earned money in 2015, but now have a significant income reduction or lost employment in 2016 and/or 2017.

  1. Who is the affected person?  [ ] Student  [ ] Spouse
     - Date of loss of income / unemployment: ___________
  2. Is loss of income due to reduction in hours at work?  [ ] Yes  [ ] No
     - If yes, provide a letter from employer stating the effective date of reduction, scheduled weekly hours and pay rate of original schedule and reduced schedule
  3. Is unemployment due to a layoff or termination?  [ ] Yes  [ ] No
     - If yes, provide an official letter from employer stating the effective date of the layoff or termination and/or anticipated return
  4. Is the affected person eligible for unemployment?  [ ] Yes  [ ] No
     - If yes, provide documentation from the Department of Labor, including denial or all benefits received and anticipated in 2016
       - Date unemployment benefits began: ___________
       - Date unemployment benefits ended: ___________
  5. Is unemployment due to the affected person quitting their job?  [ ] Yes  [ ] No
     - If yes, provide a copy of resignation letter
     - In your personal statement, you must explain why this person quit their job and what contingencies have been put in place for the loss of income
  6. Did this person receive severance pay?  [ ] Yes  [ ] No
     - If yes, provide a letter from employer stating how the severance pay will be paid and the amount to be received
  7. Has this person returned to work either at their previous employer or a new employer?  [ ] Yes  [ ] No
     - If yes, provide a copy of their most recent pay stub that shows year-to-date income and state in your letter when they returned to work, their current rate of pay, current hours scheduled, etc.
     - If no, please explain in your letter when (and if) they will be returning to work

- **Non-recurring income received during 2015**
  - You and/or your spouse received a one-time source of income and will not receive income from this source in 2016.
    - IRA/401K/other annuity distribution received to make payments for an extenuating circumstance beyond your control
      - Provide documentation of extenuating circumstance and receipts of payments made (unusually high medical expenses paid; catastrophic event to home, etc.)
    - IRA rollover to Roth IRA
      - Provide a copy of your 2015 1099 form showing the distribution

- **Loss of Child Support or Alimony income**
  - You and/or your spouse are no longer receiving court-ordered child support or alimony
    - Who was the support paid to?  [ ] Student  [ ] Spouse
      - Provide proof of amount of court-ordered support and when support ends
**Separation / divorce**

If you filed FAFSA for 2017-2018 as married, and included both incomes, but have since become separated or divorced.

- Are you and your spouse legally separated or has your divorce been finalized?  □ Yes  □ No
  - If yes, provide a copy of either court document
  - If no, but are living apart, provide proof of at least two (2) separate addresses for each party (utility bills, etc.)

**Out-of-pocket medical expenses paid**

You and/or your spouse have paid out-of-pocket medical expenses. Benefits paid by your insurance provider are not included. Expenses must have been paid in 2015, 2016, or 2017, not in more than one year.

1. Who were the expenses paid for?  □ Student  □ Spouse  □ Dependent(s)  (name)
2. Were out-of-pocket payments made due to illness?  □ Yes  □ No
   - Provide proof of out-of-pocket payments (receipts, cancelled checks, etc.)  You cannot submit invoices from your providers or Explanation of Benefits from your insurance carrier as proof.
3. Did the affected person receive sick pay outside of his/her normal salary?  □ Yes  □ No
   - If yes, provide proof of additional income
   - Date additional sick pay began: __________________________
   - Date additional sick pay ended or is expected to end: __________________________
4. Is the affected party now receiving permanent disability income?  □ Yes  □ No
   - If yes, provide proof of disability income
   - Date disability income began: __________________________

**Death of spouse**

You declared on FASFA that you were married and included your spouse’s income. Death of spouse occurred after you filed FAFSA for the 2017-2018 year.

1. Provide a copy of the death certificate or obituary notice.
2. Did / Will you receive any death benefits during 2016 or 2017 *(social security, retirement, military, etc.)*?  □ Yes  □ No
   - If yes, provide a copy of benefits statement showing amount to be received and date received
3. Did / Will you receive any life insurance settlements or other court-ordered settlements?  □ Yes  □ No
   - If yes, provide a copy of the settlement statement, including the amount received and date

**Section 2: Household information**

**A. Number of Household Members and Number in College**

Complete each column below with the name, age and relationship of every person that can be included in the household as defined below. Indicate whether or not the household member will be attending college at least half-time as a degree seeking student between July 1, 2017 and June 30, 2018.

- **Dependent students** must include parents, even if you do not live with them. Also include your parents’ other children and other people who live with your parents if your parents will provide more than half of their support.
- **Independent students** must include spouse, you and/or your spouse’s children that live with you and you provide more than half of their support, as well as other people who live with you and you provide more than half of their support.

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Age</th>
<th>Relationship</th>
<th>Name of College Attending (if applicable)</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Self</td>
<td>□ No □ Yes Middle TN State Univ.</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>□ No □ Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>□ No □ Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>□ No □ Yes</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>□ No □ Yes</td>
</tr>
</tbody>
</table>
**Section 3: Income Information**

Complete the following information of income or benefits that have been or will be received from January 2017 to December 2017 by student and/or spouse, regardless of tax liabilities. If you are an independent student and are married, report which person is receiving the income or benefit (if applicable). If a section applies to both student and spouse separately (not a joint account), report which person and the amount they will receive. Do not leave any section blank. Report “not applicable” (N/A) in the item(s) that do not apply. Incomplete information will delay the review of your request. **You must provide documentation of all applicable income.**

<table>
<thead>
<tr>
<th>Income Source</th>
<th>Student</th>
<th>Spouse</th>
<th>Joint</th>
<th>Actual 1/01/17 – today</th>
<th>Estimated Today – 12/31/17</th>
<th>Total Actual + Estimated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Income earned from work by student <strong>(wages, salaries, tips, etc., earned from employers)</strong></td>
<td></td>
<td></td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Income earned from work by spouse</strong> <strong>(wages, salaries, tips, etc., earned from employers)</strong></td>
<td></td>
<td></td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Business, farm or rental income</td>
<td>Student</td>
<td>Spouse</td>
<td>Joint</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Net value of asset farm / rental property:</strong></td>
<td>$</td>
<td></td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Interest/Dividend income</td>
<td>Student</td>
<td>Spouse</td>
<td>Joint</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Unemployment Compensation</strong></td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Pensions and Annuities</td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Alimony received</strong></td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>IRA distributions / 401K distribution</td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Social Security benefits</strong></td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Short-term / long-term disability benefits</td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Severance Pay</strong></td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Inheritance / other benefits received from family <strong>(including life insurance payments, etc.)</strong></td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Child support paid</strong> <strong>(Do not include support for children in your household as reported in Section 2 – Household information)</strong></td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Child support received</td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Alimony paid</strong></td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Combat pay or special combat pay <strong>(Do not enter untaxable combat pay)</strong></td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Payments to tax deferred pension and retirement savings plans</strong> <strong>(paid directly or withheld from earnings, including, but not limited to amount reported on your pay-stubs)</strong></td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>IRA deductions and payments to self-employed SEP, SIMPLE, KEOGH and other qualified plans</td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Housing, food and other living allowances paid to members of the military, clergy, etc.</strong> <strong>(including cash payments and cash value of benefits. Do not include the value of on-base military housing or basic military allowance for housing)</strong></td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Veteran’s non-educational benefits</strong> <strong>(such as Disability, Death Pension, or Dependancy &amp; Indemnity Compensation (DIC) and/or VA Educational Work-Study Allowance)</strong></td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Other misc. income</strong> <strong>(including someone paying rent, or utilities on your behalf)</strong></td>
<td>Student</td>
<td>Spouse</td>
<td></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>
**Section 4: Certification and signatures  *(Signatures must be handwritten)*

My signature below certifies the following:

- The information I have provided on this Special Condition request is true and complete to the best of my knowledge.
- The Special Condition review process is based upon the estimated income and documentation I have provided for the upcoming year. If the actual income of that year is greater than ten (10) percent of the estimated income, future requests may be denied.
- I have not knowingly or intentionally provided any fraudulent documentation. I understand if I am found to have knowingly or intentionally given false statements or fraudulent documentation, my request will be denied and I may be fined, be sentenced to jail, or both, and I may be required to repay any and all financial aid received.
- I understand that I must inform the MT One Stop if any circumstances change for the current year (after my review has been approved).
- I understand that I am requesting a Special Conditions review based on my (and/or my spouse’s) change of income. This review may affect the amount and type of financial aid I am eligible for.
- I understand that there must have a Partners for Education (PIE) form on file with MTSU in order for the MT One Stop or the Financial Aid Office to discuss and/or release any information regarding a financial aid award to a third party (i.e. parent, spouse, guardian, relative, etc.). If a PIE form is not on file, MTSU will only release information to the student.

<table>
<thead>
<tr>
<th>Student signature &amp; Date</th>
<th>Spouse signature &amp; Date (if applicable)</th>
</tr>
</thead>
</table>