



## Special Circumstances Form 2023-2024

Wentworth strives to provide the most suitable financial aid package based upon the information provided to our office. We make every effort to provide assistance to all students who qualify. Please be aware that all financial aid awards are need-based.

You may request a review of your financial aid package if there is a change in your family's circumstances or if there is an unusual situation that your family may be facing. Federal guidelines are very strict pertaining to special circumstances.

- *Loss of additional or untaxed income on the FAFSA (i.e., child support or alimony received)*
- *Medical or dental expenses exceeding 11% of your income protection allowance.*

Special Circumstances **do not include** the following:

- Student or parent(s) who does not wish to borrow to cover educational expenses.
- Parent(s) refusal to contribute to educational expenses.
- Parent(s) payment of student loans for older sibling.
- Expenses such as credit card debt, wedding expenses, sports, enrichment activities, etc.

The review process may have two steps.

- 1) The first step is verification of the family's FAFSA. For information on completing the verification process please visit: <https://wit.edu/admissions/financial-aid/verification>.
- 2) The second step is to complete the Special Circumstances form and provide the required documentation. Please complete all sections of the Special Circumstance form as completely and accurately as possible. Your file will not be reviewed until all documentation is submitted.

Once the verification is complete and all documentation is submitted, the review will take approximately 10 to 15 business days to complete. Additional processing time may be needed if more information is required. Your Financial Aid Counselor will update you on the decision.



Student's Name \_\_\_\_\_ (WIT ID) # \_\_\_\_\_

This request for review is for (please check all that apply):

Parent 1 Parent 2 Student Spouse

COMPLETE ALL SECTIONS THAT APPLY TO YOUR CIRCUMSTANCES.

Please check the reason(s) for the change in income from actual 2020 to projected 2022 income.

- 1. Loss of job/change of income for (step) mother/(step) father
2. Loss of job/change of income for student or spouse
3. Medical/Dental expenses
4. Divorce/Separation in family for student or parents
5. Death of parent/spouse
6. Disability of student/parent/spouse
7. Loss of 'one time' income
8. Loss of child support or alimony
9. Loss of small family business
10. Other, please describe below

Section 1

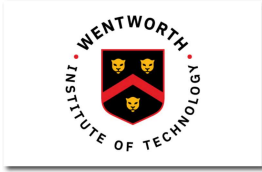
If loss of job or change in income, please complete the following section

The date of the loss of employment
2023 projected earnings for the year for (step) father
2023 projected earnings for the year for (step) mother
All other taxable income
Projected nontaxable income
Disbursement of retirement fund

Section 2

If medical/dental expenses, please complete the following

Out of pocket medical/dental expenses paid for the household for 2021
Please note, you will need to provide a detailed, itemized list or actual receipts of direct payments you made.
Premiums and insurance payments do not count.



**Section 3**

**There has been a divorce/separation in the family**

The custodial parent is now (circle one): mother/father Name of custodial parent \_\_\_\_\_

Please attach copy of legal separation or divorce documentation

Indicate the number of family members now in the household \_\_\_\_\_

Indicate the number of family members now in college \_\_\_\_\_ (Do not include your parents in number in college)

**Section 4**

**Death of parent or spouse**

Name of the deceased \_\_\_\_\_

Date of the death \_\_\_\_\_

Please attached proof of death

Please attach any life insurance benefits

**Section 5**

**Disability of student/parent/spouse**

Name of the person receiving disability \_\_\_\_\_

Date the disability started \_\_\_\_\_

Please provide additional proof (e.g. letter, end of the year statement, etc.)

**Section 6**

**Loss of "one time" income (for example, inheritance, moving expenses, back pay from social security rollover to IRA/pension account).**

What was the one time income? \_\_\_\_\_

What was the one time income used for and please explain why it is not available for educational purposes:

\_\_\_\_\_

\_\_\_\_\_

Please attach documentation supporting one-time income

**Section 7**

**Loss of child support or alimony**

Date you received \_\_\_\_\_ and amount \$ \_\_\_\_\_ per month.

Date the support or alimony stopped \_\_\_\_\_

If child support, name of children you are no longer receiving child support for \_\_\_\_\_

Do you receive child support for other children? \_\_\_\_\_

Please attach proof of loss of child support or alimony.



**Section 8**

**Loss of Income/Revenue for Small Family Business**

Name of the business \_\_\_\_\_

Date the business closed \_\_\_\_\_

2021 IRS Schedule C;

2021 Taxes and W-2;

Copy of 2021 IRS SE

**Section 9**

Please explain in detail the circumstance(s) listed above on a separate piece of paper

**Section 10**

**CERTIFICATION:** I certify that the information provided on this form is true and complete to the best of my knowledge. I understand that if I do not provide proof of the information on this form to the Financial Aid Office the student will not be evaluated for special circumstances. I understand that outstanding charges must be paid by the due date regardless of submission of this form.

**Parent's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_

**Student's Signature** \_\_\_\_\_ **Date** \_\_\_\_\_