

# Request for Reconsideration

## Based on Extenuating Circumstances 2009-2010

Student's Name \_\_\_\_\_ SSN \_\_\_\_\_

This form may be used for the 2009-2010 academic year if the financial situation used in the completion of your Free Application for Federal Student Aid has changed or if you have unusual circumstances for 2008.

**1. Check all that apply.**

**If you are an independent student:**

- 1.  Loss of employment or change of employment status for you or your spouse.
- 2.  Divorce/separation or death of your spouse.\*
- 3.  Loss of untaxed income (Social Security benefits, pension, etc.)\*
- 4.  Disability of you or your spouse.
- 5.  Unusual medical or dental bills or handicapped-related expenses (7.5% of adjusted gross income.)\*
- 6.  Other unusual debt or expenses.

**If you are a dependent student:**

- 7.  Your or your parents' loss of employment or change of employment status.
- 8.  Divorce/separation or death of a parent.\*
- 9.  Loss of untaxed income (Social Security benefits, pension, etc.)\*
- 10.  Disability of you or your parent.
- 11.  Unusual medical or dental bills or handicapped-related expenses (7.5% of adjusted gross income.)\*
- 12.  Other unusual debt or expenses.

\*Adjustment to 2008 income (line item)

Attach a copy of 2008 Federal Taxes

**2. Please complete this chart for 2009**

Income	Student	Spouse	Parent
Wages, salaries, severance pay	\$	\$	\$
Other taxable income	\$	\$	\$
Unemployment benefits to be received			
Untaxed Social Security benefits	\$	\$	\$
Adjusted gross income (circle one) Single Joint File Separately	\$	\$	\$
Taxes paid (circle one) Single Joint File Separately	\$	\$	\$
EIC (circle one) Single Joint File Separately	\$	\$	\$
Additional child tax credit	\$	\$	\$
Child support	\$	\$	\$
Other untaxed income	\$	\$	\$
<b>Total Income</b>	<b>\$</b>	<b>\$</b>	<b>\$</b>

**3. Certification**

All the information on this form and supporting documents is true and complete to the best of my knowledge.

\_\_\_\_\_  
Signature of Student

\_\_\_\_\_  
Date

\_\_\_\_\_  
Signature of parent or spouse, if applicable

\_\_\_\_\_  
Date

**4. See reverse side of this form for required documentation.**

For office use only:

Approved     Rejected    Financial Aid Director Signature

Date

# Required Documentation for Extenuating Circumstances

## Loss of employment or change in employment status

- ≡ Letters from prior employers, stating termination dates and 2009 earnings to date-on letterhead, signed, and dated.\*
- ≡ Letters from any current employers, stating expected earnings for 2009 on letterhead, signed, and dated.\*
- ≡ Unemployment recap showing amount of benefits received and the expected unemployment to receive in 2009 OR statement indicating no benefits received or expected to be received in 2009.\*

*\*Information required for student and parent(s) if dependent.*

*\*Information required for student and spouse if independent.*

## Divorce or separation of student or parent

- ≡ Divorce—copy of divorce decree.
- ≡ Separation—copy of the legal separation document or a signed statement from your attorney, showing the date of separation.

If no legal separation has been filed, you must provide the following: a tax return showing separate filing status, or documents to prove you have a separate residence such as statement from landlord, utility bills in your name, etc.

## Death of a spouse or parent

- ≡ A death certificate, an obituary notice, or a notarized statement from an unrelated third party.

## Loss of untaxed income

- ≡ A copy of a letter from the agency that provided benefits, detailing termination of benefits, and copies of summaries of benefits.

## Disability of student or spouse or parent

- ≡ Medical documentation of disability and of any benefits received as a result of the disability.\*
- ≡ Income from all sources for 2009.\*

*\*Information required for student and parent(s) if dependent.*

*\*Information required for student and spouse if independent.*

## Unusual medical or dental bills or handicapped-related expenses

- ≡ A copy of Schedule A of the Federal 1040 form or canceled checks or receipts showing amount paid with statement from insurance company showing expenses were not reimbursed.

## Other unusual circumstance not covered above

- ≡ Explanation and documentation.

**Attach required documentation to completed form, and return to the Financial Aid Office, NPCC College.**