

## IVY TECH COMMUNITY COLLEGE

**Financial Aid Office** 

Special Circumstance Request Form 2024-2025

Form accepted by the Financial Aid Office AFTER March 1, 2024

Student Name	Student ID # C
Address	_ Telephone   ()
City State _	Zip Code
The federal STUDENT AID INDEX (SAI) is calculated to assess the ability of students Readily-verifiable information from the federal income tax return has proven the more for this reason, data from the 2022 tax year is reported on the 2024-2025 Free Applit there have been changes to the family's income or unusual expenses that may not may decide on a case-by-case basis to modify data elements for a re-calculation IMPORTANT: The Financial Aid Office will contact students after receiving the documentation will be needed to process the Special Circumstance Request. Recreceived. Any aid already awarded to you will be adjusted accordingly once completed and changes are accepted by the US Department of Education. INSTRUCTIONS:	ost reliable indicator of a family's available income. ication for Federal Student Aid (FAFSA). However, be reflected on the FAFSA, the Financial Aid Office of your federal SAI.  The request to explain what additional quests will be reviewed in the order they are
Step 1: File the Free Application for Federal Student Aid (FAFSA) for 2024-2025  Step 2: Complete Section 1 and then provide a brief description of the ext below.	
Loss of Income: if student/spouse/parent has been impacted by any of the been impacted	elow.
Loss of Other Income:	sum retirement distribution, child
<ul> <li>Separation or Divorce:         <ul> <li>Student and Spouse</li> <li>Parents of dependent student</li> </ul> </li> </ul>	

Updated February 2024

then select "Finance Forms" link. Select  Step 4: Submit to  My signature below submitted to the Finance.	lete all other requirements. (Log in to Mylvy. Under the "Browse Topics" section select "Billing & Financial Aid," notal Aid Requirements." Click the "Requirements, Verification Documentation and Financial Aid Authorization to the aid year, then click the "Student Requirements" tab to see your requirements.)  This form to your local Financial Aid Office.  The we certifies that the information provided on this form is true and accurate at the time this information is Financial Aid Office. I agree to provide proof of the information and additional documentation when requested. I the federal penalty for providing false or misleading information is a \$10,000 fine, a prison sentence, or both.
then select "Finance Forms" link. Select	ncial Aid Requirements." Click the "Requirements, Verification Documentation and Financial Aid Authorization t the aid year, then click the "Student Requirements" tab to see your requirements.)
then select "Finance	ncial Aid Requirements." Click the "Requirements, Verification Documentation and Financial Aid Authorization
Step 3: Comple	
	SCRIPTION OF CIRCUMSTANCE  brief description or attach a statement:
	Other unusual expenses
	Health care costs not covered by insurance
	penses Paid (Please Select One): Unusual medical expenses
	Parent of dependent student Spouse of student
☐ Death of:	