

ILLINOIS CENTRAL COLLEGE
 SPECIAL CIRCUMSTANCES APPLICATION
 2009-2010 **INDEPENDENT** STUDENT

Student Name: _____ Date: _____

Student ID #: _____

Federal Student Aid Regulations provide the potential for reevaluation of your financial circumstances change. The 2008 income information that you reported on your financial aid application may not be an accurate indicator of your ability to pay for educational costs.

Check the circumstance that best describes your situation. Provide the documentation requested for that situation and complete the income worksheet. If this form is incomplete or lacks the required documentation, no action will be taken. Please submit photocopies, as these documents will not be returned to you. Submission of this form does not guarantee a change in your financial aid eligibility.

The reason for filing a Special Circumstances form:

_____ A. Unemployment or change in employment that has been for at **least an eight (8) weeks** in 2009.

Required Documentation:

1. A SIGNED copy of your and your spouse's 2008 federal tax return.
2. Last or current paycheck stub showing 2009 year-to-date earnings.
3. Verification of unemployment and amount of benefits received (if applicable).
4. Verification of disability and amount of benefits received (if applicable).
5. A written explanation regarding circumstance that includes the name and address of employer, dates of employment, and the reason for loss or change in employment.

_____ B. A supporting Spouse has died.

Required Documentation:

1. Copy of death certificate.
2. A SIGNED copy of your and your spouse's 2008 federal tax return and W-2's.

_____ C. You and your spouse have separated or divorced.

Required Documentation:

1. Copy of separation or divorce decree (indicating date of separation/divorce).
2. A SIGNED copy of your and your spouse's 2008 federal tax return and W-2's.

_____ D. Medical and dental expenses that exceed 11% of your total income.

Required Documentation:

1. 2008 1040 Schedule A or, if schedule A was not filed:
2. Provide copies of cancelled checks or paid receipts for expenses **paid** in 2008 that were not reimbursed by insurance.

_____ E. A situation you feel warrants consideration for special circumstances (such as non-recurring income, loss of a benefit; i.e. child support, social security for a surviving dependent, unemployment, disability, workman's comp, or other).

Required Documentation:

1. Provide written explanation and supporting documentation.
2. A SIGNED copy of your and your spouse's 2008 federal tax return.

All special circumstance categories must complete the income worksheet in addition to providing the requested documentation (except category D. medical & dental expenses).

Your Family's **Expected** 2009 Income:

1. In 2009, how much will **you** earn from work? \$ _____
2. In 2009, how much will **your spouse** earn from work? \$ _____
3. In 2009, how much will **you** receive in Unemployment Compensation? \$ _____
4. In 2009, how much will **your spouse** receive in Unemployment Compensation? \$ _____
5. In 2009, what amount will your tax-deductible payments to IRA and/or Keogh be? \$ _____
6. In 2009, how much will **you** receive in Child Support? \$ _____
7. In 2009, how much will **you** receive in Workers' Compensation? \$ _____
8. In 2009, how much will **your spouse** receive in Workers' Compensation? \$ _____
9. In 2009, how much will **you** receive in Social Security Benefits? \$ _____
10. In 2009, how much will **your spouse** receive in Social Security Benefits? \$ _____
11. In 2009, how much will **you and your spouse** receive in TANF or ADC? \$ _____
12. In 2009, how much will **you and your spouse** receive in other untaxed income, such as disability Earned Income Credit, housing, food and other living allowances from the military, clergy and others? (include cash payments and cash value of benefits.) \$ _____

Total Taxed and Untaxed Income: \$ _____

Child Support Payments to be **paid** by you and your spouse in 2009. \$ _____

Certification: All of the information on this form is true and complete to the best of my knowledge. If asked by an authorized official, I agree to submit proof of the information that I have given on this form. I realize that this proof may include a copy of my Federal or State tax return.

Student Signature

Date

Student Spouse Signature

Date

Return this form and required documentation to the:

Financial Assistance Office
Illinois Central College
One College Drive
East Peoria, IL 61635

If you are filing a special circumstance after January 1, 2010 you must submit a copy of your 2009 Tax Return