

Queens University of Charlotte
Office of Student Financial Services
2009-10 Special Circumstances Application for Dependent Students

Student Name _____ Student ID _____

Address _____

Telephone Number _____ Email _____

If your family's 2009 income will be significantly less than the 2008 income reported on your FAFSA, your parents can complete this form and return it to Student Financial Services for further consideration of your 2009-10 financial aid.

In order to verify your 2008 financial information, please submit the items listed below along with this completed form.

- 2009-10 Verification Worksheet for Dependent Students
- Signed copy of parent 2008 Federal Income Tax Return
- Signed copy of student 2008 Federal Income Tax Return (if student filed)

Please review the sections below and complete the explanation that best applies to your 2008 reduction in income. Submit all documentation associated with the selected explanation.

Parents have separated/divorced since student filed the FAFSA

Date of change _____ Parent with whom the student now resides _____

- Copy of both parents' 2008 W-2 Forms

Death of parent since student filed the FAFSA

Date of change _____ mother/stepmother father/stepfather

- Copy of parent's death certification or obituary
- Copy of both parents' 2008 W-2 Forms

Permanent and total disability of parent since student filed the FAFSA

Date of change _____ mother/stepmother father/stepfather

- Attending doctor's statement of disability
- Documentation of date disability resulted in termination of employment
- Documentation of employer disability payments
- Notification of workers' compensation
- Copy of most recent pay stubs or statement of earnings to date for all 2009 employment of both parents
- Documentation of all other sources of parent income (taxable and non-taxable)

Parent employment changed due to job loss, job reduction, or retirement

Date of change _____ mother/stepmother father/stepfather

Reason for change _____

- Employer's notice and/or written documentation of termination/cessation
- Copy of most recent pay stubs or statement of earnings to date for all 2009 employment of both parents
- Notice of application for unemployment compensation and amount received
- Documentation of all other sources of parent income (taxable and non-taxable)

Loss of Benefits

Social Security, Disability, or Welfare Benefits

Date of change _____ self father/stepfather mother/stepmother

If student loss of benefit

- Copy of most recent receipt of benefit or pay stub

If parent loss of benefit, please submit:

- Benefit provider's notification to you of loss of benefit
- Copy of most recent pay stubs or statement of earnings to date for all 2009 employment of both parents
- Documentation of all other sources of parent income (taxable and non-taxable)

Child Support and/or Alimony

Date of change _____

- Court documents verifying loss and date/conditions of loss
- Copy of most recent pay stubs or statement of earnings to date for all 2009 employment of custodial parent
- Proof of child support received in 2008 and 2009
- Documentation of all other sources of parent income (taxable and non-taxable)

Worker's Compensation

Date of change _____

- Letter from Bureau of Worker's Compensation stating termination date of benefits
- Copy of most recent pay stubs or statement of earnings to date for all 2009 employment of both parents
- Documentation of all other sources of parent income (taxable and non-taxable)

Unusual Medical/Dental Expenses

- Statements from medical providers showing amounts **paid** by parents/student in 2008 and 2009

Other

Use the area below to provide a written explanation detailing all reasons your family's 2009 income will be reduced, or attach a letter of explanation.

Please complete page 3 before signing below.

Certification Statement

I certify that all of the information contained in this application is true to the best of my knowledge. I understand that failure to provide the required documentation may result in denial of this application.

Parent's signature

Student's signature

Date

Date

Student Name: _____

Complete all sections below with income (prior to exemptions, adjustments, or deductions) that your family received from January 1, 2009 to the present and expects to receive from present until December 31, 2009.

Provide documentation for all items you list below.

2009 Gross Taxed Income	Father's Income		Mother's Income	
	Actual to date	Projected	Actual to date	Projected
Wages, salaries, tips				
Severance pay				
Interest and dividend income				
Taxable refunds, credits, or offsets of state and local income taxes				
Alimony received				
Business or farm income				
Capital gains				
IRA distributions				
Pensions and annuities				
Rental real estate, royalties, partnerships, S corporations, trusts				
Unemployment compensation				
Social security benefits that were taxed				
Any other taxed income				
Total 2009 Gross Taxed Income				

2009 Untaxed Income	Father's Income		Mother's Income	
	Actual to date	Projected	Actual to date	Projected
Payments to tax-deferred pension and savings plans				
IRA deductions and payments to self-employed SEP, SIMPLE, and Keogh and other qualified plans				
Child support received for all children				
Tax exempt interest income				
Untaxed portion of IRA distributions				
Untaxed portion of pensions				
Credit for federal tax on special fuels				
Housing, food and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits)				
Veteran's non-education benefits such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances				
Any other untaxed income or benefits not reported elsewhere, such as worker's compensation, untaxed portions of railroad retirement benefits, Black Lung Benefits, Refugee Assistance, etc.				
Cash received, or any money paid on your behalf, not reported elsewhere on this form				
Total 2009 Untaxed Income				