

## 2025-26 Special Circumstance Request

## STUDENT INFORMATION

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Student Name

\*Best Person to Contact

Relationship

Phone Number\_\_\_\_

AU Student ID

\*Note: For currently enrolled students, this person must be on your FERPA authorization form and know the FERPA code.

## This form cannot be completed in pencil. Please submit with ALL applicable documentation.

A Special Circumstance Request is intended for students, spouses, and/or parents who have experienced significant life changes, which include, but are not limited to, the situations noted on this form.

The purpose of this request is to assess an ability to administratively change your FAFSA data due to your unique circumstances and the documents submitted. There is no guarantee an approval will result in increased aid eligibility.

- Thorough documentation is required to explain and verify your situation. Incomplete documentation will cause delays. Additional documents may be requested after initial review.
- After verifying all submitted documents, multiple corrections may be administratively made to your FAFSA before a new offer letter can be generated. The Department of Education will notify you by email of any corrections made.
- This request is in effect for the 2025-2026 academic year only. Policies and procedures are subject to change as influenced by regulatory changes.

A Special Circumstance review begins after the Office of Financial Aid receives all required documents. Once your request has been fully evaluated and any permissible FAFSA changes have been made, your financial aid eligibility is reassessed. You will be notified of the Special Circumstance Request outcome. A new offer letter will be issued if the request is approved and the student is eligible for additional financial aid.

## **SECTION A: REQUIRED ITEMS**

Print the student name and student ID number on all submitted documentation to assure proper identification.

- 1. Completed Special Circumstance Request form
- 2. A statement explaining your appeal condition
- 3. Completed 2025-26 Family Size Verification form (Form B1 on aurora.edu/forms2025)
- 4. Copy of 2023 IRS Tax Return Transcript for all tax filers (student/spouse/parent) listed on the FAFSA Request a free Tax Return Transcript from the IRS:
  - Visit IRS.gov and click on "Get Your Tax Record" and then "Get Transcript by Mail" to have transcript(s) mailed to you
  - Call 800-908-9946
  - Submit IRS Form <u>4506-T</u> or 4506T-EZ to the IRS
- 5. Applicable Non-Tax Filer Verification form for all non-tax filers (student/spouse/parent) listed on the FAFSA (Form B4, B5, and/or B6 on aurora.edu/forms2025)
- **6**. Copy of **all 2023 W-2s** for all people (student/spouse/parent) listed on the FAFSA

ECTION B: APPEAL CONDITIONS (Check applicable box and provide requested information for situation.)	

Loss of Job or Reduction in Ho	ours/Salary	
Name of Person Experiencing Loss	of Job or Reduction in Hours/Salary	
January 2024-December 2024 (if me	ore than three employers in 2024, attach addition	al sheet)
Name of Employer	Months Worked in 2024 (ex: Jan-Mar)	Income Earned in 2024
		\$
	<u> </u>	\$
		\$
2024 Unemployment Benef		
2024 Other Income: \$	its: \$ Type of Income:	
Vanuary 2025-December 2025 (if more Name of Employer	re than three employers in 2025, attach additiona Months Worked in 2025 (ex: Jan-Mar)	Projected Income Earned in 2025
Name of Employer	MONUNS WORKCU III 2023 (CA. Jan-Mar)	Projected Income Earned in 2025
		\$
		\$
Projected 2025 Unemploym	ent Benefits: \$ ne: \$ Type of Income:	
**Additional information will be re	equested after initial review.	
<b>Loss of Benefits (taxed Social S</b>	security, child support, etc.)	
• Documentation showing am	nount of benefit and date that it was/will be termin	nated
<b>D</b> Separation/Divorce of Student	or Parents Date of Separation/D	lizoroa
Projected Yearly Maintenance Amou	-	
•	n of the separation/divorce such as official court of	
•	f of separate addresses (i.e. separate utility bills, s	
	e amount of maintenance and/or child support, if	
Death/Disability of Parent/Spo		
<ul> <li>Provide official documentat</li> </ul>	ion of the death/disability.	
<b>D</b> Major Medical Expenses Paid <sup>3</sup>		
•	ed on <u>Schedule A</u> of the submitted <u>2023 IRS Tax</u>	Return Transcript can be considered.
0	vate Elementary, Middle, and High Schools	
FIOVIDE a COPY OF 2020 202	•••••••••••••••••••••••••••••••••••••••	the line student's name
_	6 tuition bill(s) on school letterhead reflecting the	e attending student's name.
□ Other	6 tuition bill(s) on school letterhead reflecting the	
<b>Other</b> If you feel you have an unusual of	•••••••••••••••••••••••••••••••••••••••	nditions, explain the circumstances in a
Other If you feel you have an unusual of written statement in detail. Subm	6 tuition bill(s) on school letterhead reflecting the circumstance not covered in any of the above con it any applicable documentation to support your	nditions, explain the circumstances in a
Other If you feel you have an unusual of written statement in detail. Subm SECTION C: CERTIFICAT I certify that the information I have provided re can be used to override federal regulations a	6 tuition bill(s) on school letterhead reflecting the circumstance not covered in any of the above com it any applicable documentation to support your <b>CION</b> regarding my request is true, complete, and accurate to the best <b>ind submit corrections to my FAFSA.</b> By signing this app by request. I understand that if I purposely give false or misle	nditions, explain the circumstances in a explanation. t of my knowledge. <b>I understand this informatio</b> plication I agree, if asked, to provide
Other If you feel you have an unusual of written statement in detail. Subm SECTION C: CERTIFICAT I certify that the information I have provided recan be used to override federal regulations a information that will verify the accuracy of m	6 tuition bill(s) on school letterhead reflecting the circumstance not covered in any of the above com it any applicable documentation to support your <b>CION</b> garding my request is true, complete, and accurate to the best <b>ind submit corrections to my FAFSA.</b> By signing this app y request. I understand that if I purposely give false or misle ed, sent to prison, or both.	nditions, explain the circumstances in a explanation. t of my knowledge. <b>I understand this informatio</b> plication I agree, if asked, to provide