

Special Circumstance consideration may be available if your current financial situation is not accurately reflected by the 2017 tax information. You must submit a signed detailed letter explaining the situation and required documentation as outlined below. All documents must be completed before the Special Circumstance Petition can be reviewed. Please be aware that submitting an appeal does not guarantee an adjustment will be made nor are the documents listed below final. Please provide all required documents in a timely manner to avoid any delays.

Student Information:

Last Name	First Name	M.I.	NPC ID #
Mailing Address (include apt. no.)		City	State
			Zip Code

Check the box that applies to you:

I am an independent student with a Special Circumstance.
You and your spouse, if you are married.

I am a dependent student and I am required to provide my parent(s) information. Who is requesting the Special Circumstance: (check box)

Student

Your parent(s) (stepparent, if remarried or biological parents if living together) even if you don't live with them.

Check special circumstances you would like to be considered and submit required documentation:

Criteria for Consideration:	You must Provide:
<input type="checkbox"/> Unemployed/Dislocated Worker Must have occurred after application date for FAFSA Date Unemployment occurred: ____/____/____ Date began new job, if applicable: ____/____/____ Relationship to Student: _____	<input type="checkbox"/> Documentation of unemployment benefits; or <input type="checkbox"/> Letter of Termination from previous employer(s), and; <input type="checkbox"/> 2017 IRS Tax Transcript (depending on when income loss occurred) and; <input type="checkbox"/> Copies of 2017 W-2 form(s) and; <input type="checkbox"/> Signed statement detailing situation <input type="checkbox"/> For 2017 Non-tax-filers, provide year to date income or check stubs.
<p>Dislocated worker definition: has been laid off or received a lay-off notice from a job; was self-employed but is now unemployed due to economic conditions or natural disaster; or is a displaced homemaker, is unemployed or underemployed, and is having trouble finding or upgrading employment.</p>	
<input type="checkbox"/> Reduction of Income Date reduction of income began: ____/____/____ Type of income: _____ Provide taxes for year income loss began	<input type="checkbox"/> 2017 IRS Tax Transcript (depending on when income loss occurred) and; <input type="checkbox"/> Copies of 2017 W-2 form(s) and; <input type="checkbox"/> Proof of reduced income; <input type="checkbox"/> Sign statement detailing situation <input type="checkbox"/> For 2017 Non-tax-filers, provide year to date income or check stubs.
<p>Reduction of income is defined: as a student (or spouse) or parent(s), who is currently employed, but have less income for the 2017 year compared to 2016. Examples include: loss of wages due to reduced hours, alimony, unemployment, child support, or other income ended.</p>	
<input type="checkbox"/> Death of Spouse or Parent if dependent student Must have occurred after application date for FAFSA Name of deceased: _____ Date of Death: ____/____/____ Relationships to student _____	<input type="checkbox"/> Copy of Obituary or Certificate of Death and; <input type="checkbox"/> Copies of 2016 W-2 form(s) and; <input type="checkbox"/> 2016 IRS Tax Transcript and; <input type="checkbox"/> Signed detailed statement

<input type="checkbox"/> One-time Source of Income Source of one-time income payment: _____ Date one-time payment was received: ___/___/___ Future payments from source: \$ _____ Beginning balance of account, if applicable: \$ _____ Remaining balance on account, if any \$ _____ Examples of one-time source of income: inheritance, moving expense allowance, back-year social security payments, IRA distribution income, or other type of one-time income. One-time gambling income cannot be considered.	<input type="checkbox"/> Copy of 2016 IRS Tax Transcript (for comparison, if not already submitted) and; <input type="checkbox"/> Copy of 2017 IRS Tax Transcript and; <input type="checkbox"/> Copies of 2017 W-2 form(s) <input type="checkbox"/> Proof of income source and beginning and ending balances on account <input type="checkbox"/> Copy of documentation of inheritance, and <input type="checkbox"/> Signed statement detailing income source and what one-time income was used for and any remaining balances
<input type="checkbox"/> Request for dependency review You are a dependent student requesting independent status. According to Federal regulations, it is the parents' responsibility first to provide all required information. Parent refusal to contribute to the student's educational costs or provide income information does not meet the criteria for a dependency override.	<input type="checkbox"/> Document to support your situation (Police report, documented report of abuse, order of protection, homeless shelter); <input type="checkbox"/> Three letters from professional individuals other than friends or family members who are aware of your situation (letter from high school counselor, outreach center); <input type="checkbox"/> Signed detailed statement
<input type="checkbox"/> Change in Marital Status (Separated / Divorced) Date of change in marital status: ___/___/___ Will child support be received by custodial parent? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, date payments will begin ___/___/___ Amount: \$ _____ <input type="checkbox"/> Benefits received from the Department of Economic Security (DES) for your dependents and/or verification of household from the Department of Economic Security (DES), if benefits are currently being received.	<input type="checkbox"/> Legal documentation of change in marital status (divorced, separated status, pending divorce) and; <input type="checkbox"/> Copies of 2016 and 2017 W-2 form(s) and; <input type="checkbox"/> 2016 (for comparison, if not already submitted) and 2017 IRS Tax Transcripts; <input type="checkbox"/> Signed statement detailing situation <input type="checkbox"/> Order of protection or other documents to verify that spouse (parent) is not in the household. <input type="checkbox"/> You and your spouse's (parents') utilities statements and /or rental lease to verify two separate households. Post Office box cannot be considered.

CERTIFICATION: I certify that the information provided on this form is complete and accurate to the best of my knowledge. If asked by an authorized official, I agree to give proof of the information. I understand that, if I do not give proof when asked, this request will not be processed. I understand that providing false information may result in a delay, reduction, or denial of federal financial aid funding and may subject me to criminal charges.

	Date		Date
Student's Signature (Required)		Parent's Signature (Required for Dependent student)	

Return form to: NPC Financial Aid Office, PO Box 610, Holbrook, Arizona 86025 or email to: financialaid@npc.edu or Fax: (928) 524-7319

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