

2020 – 2021 Special Circumstances Review

The Financial Aid Office recognizes that there are times when it is necessary to re-evaluate a student's eligibility for financial aid:

- the family has experienced a **Change in Financial Circumstances**;
- the student is classified as "dependent" but is self-supporting or not able to have contact with their parents and requires a **Dependency Status Review**; or
- the student needs additional loan funding for educational expenses and requires a **Cost of Attendance Budget Adjustment**.

Please check the box below to indicate which type of special circumstances you would like us to consider. Submit the required documentation either by email to pjrequest@fa.monmouth.edu, by fax to 732-263-5577, or by mail to Monmouth University Financial Aid Office, 400 Cedar Avenue, West Long Branch, NJ 07764. Please note that your request for a special circumstances review will not be processed until you have supplied **all** documentation.

Student's Full Name:

Student's ID:

Student's Email:

Alternate Email:

Parent's Full Name:

Parent Email:

Best Telephone Number to Reach You:

Change in Financial Aid Circumstances

(Note that only those circumstances that are beyond the student's or family's control will be considered for review. Examples of circumstances that will not be considered are: consumer debt, bankruptcy, private school tuition, parent unwillingness to complete the financial aid application, voluntary reduction in overtime, etc.)

Unemployment

- Name of unemployed person:
- Relationship to student:
- Has the person returned to work? Yes No
If yes, indicate date:
- Signed copy of Spouse/Parent(s) 2019 Federal Income Tax Return, including all pages
- Spouse/Parent(s) 2019 W-2's
- Notice of termination from former employer with last day of employment and severance/vacation/sick pay included (if applicable)
- Copy of 'Notice of Benefit Determination' from unemployment
- Verification of retirement or medical disability
- Last pay stub and current pay stub (only if person has returned to work)

Student Loss of Full-Time Work

- Student is currently working: Part-time Unemployed
- Reason for change in employment status (Briefly describe below):

- Signed copy of Student's 2019 Federal Income Tax Return and Student 2019 W-2's

- Last pay stub at full-time
- Most recent pay stub at part-time

Divorce or Separation

- Date of divorce or separation:
- Name of parent student lives with:
- Monthly amount of support received:
 - Child Support (for all children): \$
 - Alimony: \$
 - Household Support: \$
- Signed copy of Student or Parent(s) 2019 Federal Income Tax Return, including all pages
- Student or Parent(s) 2019 W-2's
- Divorce decree (If the decree is not available, submit verification of different addresses. The following are acceptable proof separate residence: driver's license, signed leases, utility bills, etc.)

Death of a Parent or Student's Spouse

- Name of the deceased person:
- Date of Death:
- Date Social Security Benefits began:
- Monthly amount for all family members: \$
- Signed copy of Student and Parent(s) (if dependent) 2019 Federal Income Tax Return, including all pages
- Student and Parent(s) (if dependent) 2019 W-2's
- Death certificate

Loss of Untaxed Income

- Person who lost benefits:
- Type of benefits lost:
- Date benefits were lost: Total received in 2019: \$
- Signed copy of Student or Parent(s) 2019 Federal Income Tax Return, including all pages
- Student and Parent(s) 2019 W-2's
- Statement of terminated benefits
- Name of person incurring the expenses:

Unreimbursed Medical Expenses

- Unreimbursed medical expenses in 2018 or 2019.
- Signed copy of Student or Parent(s) 2018 or 2019 Federal Income Tax Return, including Schedule A (if filed)
- If Schedule A was not filed, cancelled checks and/or receipts for expenses paid AND statements from insurance company indicating that the expense is unreimbursed

- Other**
- Please provide a letter of explanation.
 - Contact the Financial Aid Office at 732-571-3463 to discuss your circumstances.

Dependency Status Review

You have been separated from your parents because of an unsafe home environment, or your parent has been institutionalized or is in a correctional facility.

You have been separated from your parents, come from a documented background of historical poverty, and are living with a relative or someone who is supporting you.

- Other
- o Please provide a letter of explanation.
 - o Contact the Financial Aid Office at 732-571-3463 to discuss your circumstances.

Provide the following information:

- o All supporting documentation (court documents, police reports, social service agency reports)
- o Student's 2018 Federal IRS Tax Return Transcript or Tax Return
- o Student's 2018 W-2's
- o Please indicate how you paid for the living expenses itemized below.

| Categories | Monthly Amount | By Whom (Relative, Roommate, etc.) |
|--|----------------|------------------------------------|
| 1. Rent (any amount paid on your behalf) | \$ | |
| 2. Utilities (Gas/electric, Phone, Water, etc.) | \$ | |
| 3. Cell Phone | \$ | |
| 4. Automobile Payments | \$ | |
| 5. Automobile Insurance | \$ | |
| 6. Automobile Maintenance/gas (Transportation) | \$ | |
| 7. Life Insurance | \$ | |
| 8. Health Insurance | \$ | |
| 9. Other Medical expenses paid on your behalf | \$ | |
| 10. Credit cards (bills paid on your behalf) | \$ | |
| 11. Clothing | \$ | |
| 12. An Allowance | \$ | |
| 13. Miscellaneous expenses: (please list in a & b) | | |
| a. | \$ | |
| b. | \$ | |

- o Third Party Reference. One letter from a non-family member who can attest to the student's situation. Examples of such a person include, but are not limited to: teacher, counselor, employer, clergy, social worker, attorney, court official, psychiatrist, psychologist, medical professional, law enforcement agent, etc.

Cost of Attendance Budget Adjustments

Off-Campus

- Attach a letter listing all monthly expenses for off-campus living and transportation expenses. Such as rent, utilities, food, internet/cable, car maintenance, etc.

Child Care

- Attach a letter listing all monthly expenses for child care.

Educational Expenses

- Attach a letter listing all monthly expenses for educational expenses. Such as books, computer, lab equipment, etc
- Provide receipts (if applicable).

Other

- Please provide a letter of explanation.
- Contact the Financial Aid Office at 732-571-3463 to discuss your circumstances.