



Special Circumstances Application for Dependent Undergraduates
2019 – 2020

This form will not be processed until TCU receives the results of your Free Application for Federal Student Aid (FAFSA) and any required documentation. Failure to provide all requested documentation will result in a delay in processing and/or denial of this request.

The TCU Office of Scholarships and Financial Aid will not consider the following situations a special circumstance:

- Fluctuations in income from self – employment or sales related positions
- Voluntary Retirement
- S – Corporations
- Unemployment less than 3 months
- Private primary/secondary education costs
- Recurring situations that remain unchanged from the previous year

Important Information:

- **Please note your file will be selected for verification.**
- **Please attach an explanation letter and documentation of your situation including layoff letter or salary reduction letter from employer if applicable.**
- **Please note, general processing time for the Special Circumstance Application takes 4 – 6 weeks. Failure to submit documentation will result in a delayed processing.**

Student's Name

TCU ID #

Parent's Name (if Dependent Student)

Phone Number

Parent's Address

City

State

Zip

Have you filed a Special Circumstance with our office in a previous aid year? Yes No

A. Loss of income from work: at least 12 consecutive weeks.

Period of unemployment from ____ / ____ / ____ to ____ / ____ / ____.

Layoff: Provide letter from employer or unemployment commission stating effective date

Termination: Provide letter from employer or unemployment commission stating effective date

Disability: Date of disability ____ / ____ / ____ . Attach documentation of disability.

One Time Income: (i.e. inheritance, moving expense, back year's social security payments, lump sum retirement or IRS distribution. You must attach a separate sheet identifying source of income and how funds were spent or invested.)

Student's Name _____

TCU ID # _____

- B. Loss of untaxed income:** at least 12 consecutive weeks.
_____ **Child Support:** Provide court document stating termination of benefits.
_____ **Worker's Compensation:** Provide a letter from Bureau of Worker's Compensation stating termination date of benefits.
- C. Divorce:** After filing the FAFSA, you and your spouse have separated or divorced. Date of divorce or separation ____/____/____. If divorced, attach a copy of divorce decree, 2017 tax return and W-2 form(s). If separated, attach a copy of 2017 W-2 forms, 2017 tax return, and proof of current address of the parent who moved out of the house.
- D. Death:** After applying for financial aid, your spouse has died. Date of Death ____/____/____. Attach a copy of the death certificate, 2017 W-2 forms, 2017 Tax Return, and proof of any insurance settlements.
- E. Other unusual circumstances:** Provide complete information regarding other unusual expenses. Attach appropriate documentation.

Please provide a copy of the most recent check stub with gross year to date (YTD) income and for each income listed. The best possible estimates for the period of January 1, 2019 – December 31, 2019. Sources of other taxable and untaxable income must be listed. Additional documentation may be requested.

Expected Income for 2019	Actual 01/01/2019 to today ____/____.	Estimated today to 12/31/2019	Total Actual income plus estimated income
Expected gross income earned from work by father/step father in 2019			
Expected gross income earned from work by mother/step mother in 2019			
Expected income earned from work by student in 2019			
Other taxable income (interest, pensions, severance, unemployment compensation, etc.) Source:			
Other untaxed income (child support, worker's compensation, cash received, etc.) Source:			
TOTAL INCOME FOR 2019			

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 give proof of the information that I have given on this form. I also realize that if I do not give proof when asked, I may not receive financial assistance. I also authorize the examination of any documents, including medical records, which may be submitted as a part of this Special Circumstance application.

Student's signature

Date

Parent or Spouse Signature

Date

Please upload through your TCU Financial Aid portal.