

NewSchool of Architecture and Design

2018-2019 Special Condition Application – Dependent Student

Student Name: _____ NSAD ID/SSN: _____

Mailing Address: _____
 _____ City State Zip Code

Daytime Telephone Number: _____ Date: _____

THIS FORM DOES NOT APPLY TO A GRADUATE STUDENT

This application is for a review of special circumstances that have arisen, which you feel may change your financial aid eligibility. We require that certain documents **MUST** be provided to support the specific special condition selected by you and/or your parent(s). We start with an evaluation of the accuracy of the information that you submitted on your Free Application for Federal Student Aid (FAFSA). We will evaluate the supporting documents along with your FAFSA to determine if you are eligible for any adjustments.

The United States Department of Education provides in the Higher Education Amendments of 1998 a reaffirmation of the use of professional judgment in determining eligibility for federal financial aid. This provision allows for case-by-case adjustments of data items used to calculate a student's expected family contribution (EFC) based on adequate documentation to address current circumstances not reflected on a student's FAFSA. The student's situation **MUST** meet one of the criteria used by NewSchool of Architecture and Design as a special condition. This means that a student who meets a special condition in the 2018-2019 award year may have his/her eligibility calculated using income from 2017 or expected income from 2018.

Required Documentation for All Conditions

- 2016 IRS Tax Return Transcript for student and parent(s). If your parent filed separate from their spouse, you must provide both IRS Tax Return Transcripts.
- 2018-2019 Verification Worksheet - Dependent
- 2018-2019 Asset Form - Dependent
- 2016 IRS Wage and Income Transcript for student and parent(s) (if applicable)
- IRS Verification of Non-Filing Letter for 2016 tax year (if your parent(s) did not file a 2016 tax return)
- 2018-2019 Special Condition Application – Dependent Student
- Detailed, personalized letter stating the reason for the special condition request. This letter must be hand signed and dated.

YOUR REQUEST WILL NOT BE CONSIDERED IF THE ABOVE REQUIRED DOCUMENTATION IS NOT PROVIDED.

No Guarantee: Reporting a special condition does not guarantee that an adjustment will be made. The Federal Government has strict guidelines that the university must follow in these situations. The Office of Financial Aid may deem that the condition does not fit the spirit of the federal regulations governing financial aid programs. **ALL DECISIONS MADE BY THE OFFICE OF FINANCIAL AID WILL BE FINAL.**

Notification: The Office of Financial Aid will review your Special Condition Application on a chronological basis. That is, applications are reviewed in the order of the date of submission. If the application is approved, the student will receive an email reflecting the approval. If the application is denied, the student will be notified as such by email. Lack of notice means the application has not been reviewed as of yet.

Situations that do NOT qualify as a Special Condition

Examples would include, but are not limited to:

- a student/parent who decides to quit their job,
- a student/parent who decides to reduce their work hours to attend school,
- consideration of expenses that are being paid on a regular basis (household bills/credit cards, car payments, mortgage payments)

Instructions for Completion

1. Check the section(s) that applies to your situation and provide all required documentation along with applicable documentation listed above.
2. Provide all requested signatures. Write student name and NSAD ID/SSN across the top of all documents you submit.
3. If additional information is required after your submittal, you will be notified by the Office of Financial Aid.

Loss of job/reduction in income

Required Documentation:

- Letter from employer (on letterhead) regarding loss of job or change in job status
- Documentation of unemployment benefits (if applicable), such as the Maximum Benefit Letter detailing the amount received
- Year-to-date earnings for 2017 (year-end paystub or W-2)
- Most recent pay stub from all 2018 employers (if applicable)

Reduced earnings due to a disability or natural disaster

Required Documentation:

- Statement from the appropriate agencies verifying disability or natural disaster

Loss of benefit, untaxed income, or one-time income received during 2016

Please circle which applies:

Unemployment Social Security Worker's Compensation Court Ordered Child Support Other _____

Required Documentation:

- Unemployment – Copy of notification of loss of unemployment benefits stating benefit ending date and monthly amount received before loss
- Social Security – Copy of the Social Security termination letter and a copy of the most recent Social Security benefits letter
- Worker's Compensation – Copy of the Worker's Compensation termination letter and documentation of benefits received
- Child Support – Copy of the court or child service agency document stating the date of termination and the amount of monthly benefits received
- One-time income – Documentation verifying the change in income and why the funds are no longer available

Divorce or separation since completion of the 2018-2019 FAFSA

Required Documentation:

- Separation papers or agreement, divorce decree/settlement, or a letter from a participating attorney or mediator stating marital status
- If not legally separated, documentation to support separate residencies (utilities bills, lease)

Death of parent since completion of the 2018-2019 FAFSA

Required Documentation:

- Copy of parent's death certificate

___ Medical or dental expenses not covered by insurance in 2016

Required Documentation:

- Schedule A of your 2016 Federal Income Tax Return OR copies of receipts or canceled checks verifying the amounts paid (Do not submit unpaid bills or amounts covered by insurance)

___ Nursing home expenses not covered by insurance in 2016

Required documentation:

- Account ledger from nursing home stating expense amounts billed and paid in 2016 (Do not submit unpaid bills or amounts covered by insurance)

___ Elementary or secondary school tuition paid in 2016

Required documentation:

- Account ledger from school stating tuition amounts billed and paid in 2016

___ Unusually high child care costs paid in 2016

Required Documentation:

- Account ledger from daycare center stating expense amounts billed and paid in 2016

FAILURE TO PROVIDE THE REQUIRED DOCUMENTATION WILL RESULT IN NO FURTHER PROCESSING OF THIS REQUEST

I certify that the information provided on this form is true and complete to the best of my knowledge. I agree to provide additional proof of the information that I have given on this form if asked by the Office of Financial Aid. I understand that the decision made by the Office of Financial Aid will be FINAL. I further understand that purposely giving false misleading information may subject me to fines and/or penalties.

Student's Signature

Date

Parent's Signature (if applicable)

Date