



2018-2019 Special Circumstance Application

The purpose of this form is to provide the student the opportunity to submit a special case for review. To secure a class schedule, the student must ensure tuition is paid in full and be enrolled in a minimum of six (6) credit hours.

Scanning:
Doc Category: Grants
Doc Type: Special Cond.
Status: Completed
Award Year: 2018

Office Use Only: CPS Selected for Verification Yes or No // Completed? Yes or No

Section I: Student Information

Last Name, First Name, Middle Initial			Student ID Number
Address			Email
City	State	Zip	Primary Contact Number

Section II: Student Reason

Check the box that best describes the reason for this review.

- Loss of Employment or Drastic Change in Income
- Loss of Income due to Divorce or Separation
- Loss of Income due to Death of Spouse/Parent(s)
- Loss of Income due to Disability
- Unusually High Medical or Dental Expenses
- Unaccompanied Homeless Youth
- Previous Year One-time Increase in Income Amount
- Elementary or Secondary School Tuition for Students, Siblings or Dependents
- Dependency Override
- Other:

Section III: Signature Requirements

Turning in this form does not establish approval. Once the student submits this form, the Financial Aid Office designee will meet with the student to discuss documentation to be submitted.

Signature	Date	Spouse Signature	Date
Parent 1 Signature	Date	Parent 2 Signature	Date
Authorized School Official	Date		