WAYNESBURG UNIVERSITY
2014-2015
SPECIAL CIRCUMSTANCES APPLICATION

NAME _____SS# _____

ADDRESS _____ PHONE _____

PARENT'S NAMES _____

The regulations governing federal financial aid programs allow financial aid administrators, after completing verification on the information submitted on the original Free Application for Federal Student Aid (FAFSA), to re-process an Expected Family Contribution (EFC) based on special or unusual circumstances that a family has encountered due to loss of employment, loss of untaxed income/benefits, marital separation, divorce, death, disability or a significant reduction in actual or anticipated 2014 income. In order to process this application, the applicant must submit the following information to the Waynesburg University Financial Aid Office:

1. An Internal Revenue Service (IRS) transcript of the student's (If married, spouse's) 2013 federal tax return.
2. Parents 2013 IRS transcript and a signed copy of IRS tax return (1040, 1040a or 1040ez).
3. Documentation of all 2013 untaxed income and/or benefits (If dependent, parents' as well).
4. The 2014-2015 Verification Worksheet (Go to www.waynesburg.edu under the link "Financial Aid.")
5. If there is a loss or reduction of employment, submit appropriate documentation (letter) from employer.

In addition to these, please explain below why you or your family qualifies for a "special circumstance." Please state not only the reason (e.g., parent became unemployed, sister's Social Security benefits end this July, etc.), but also the dates involved (e.g., parents separated on May 1, I became unemployed on June 2, etc.). Please be as detailed as possible and attach any and all appropriate documentation (copy of last pay stub/check, severance letter, etc...).

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****OVER****

PROJECTED 2014 TAXABLE (WAGES AND UNEMPLOYMENT) INCOME

STUDENT'S YTD _____ EST. INCOME TO 12/31/2014 _____ TOTAL _____

SPOUSE'S YTD _____EST. INCOME TO12/31/2014 _____ TOTAL _____

FATHER'S YTD _____EST. INCOME TO 12/31/2014 _____ TOTAL _____

MOTHER'S YTD _____ EST. INCOME TO 12/31/2014 _____ TOTAL _____

PROJECTED NONTAXABLE 2014 INCOME/BENEFITS

STUDENT'S YTD _____ EST. INCOME TO 12/31/2014 _____ TOTAL _____

SPOUSE'S YTD _____ EST. INCOME TO 12/31/2014 _____TOTAL _____

FATHER'S YTD _____ EST. INCOME TO 12/31/2014 _____TOTAL_____

MOTHER'S YTD _____ EST. INCOME TO 12/31/2014 _____ TOTAL _____

PLEASE EXPLAIN HOW THESE ESTIMATED, PROJECTED 2014 YEARLY AMOUNTS WERE

CALCULATED (e.g., $500 bi-weekly unemployment check X 20 weeks = $10,000)?

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By signing this worksheet, I (we) certify that all of the information reported on this application to re-access my eligibility for Federal and Institutional student aid is complete and accurate. Should our financial circumstances change at any time in 2014, I (we) will notify the Financial Aid Office immediately.

(If you are a dependent student, at least one parent must sign below.)

Student's Signature _____ Date _____

Spouse's Signature _____ Date _____

Father's Signature _____ Date _____

Mother's Signature _____ Date _____

If you have any questions regarding this form, please contact the Waynesburg University Financial Aid Office at 724-852-3208 or finaid@waynesburg.edu.