

REND LAKE COLLEGE 2009/2010 SPECIAL CIRCUMSTANCES APPEAL

FINANCIAL AID OFFICE

Student's Last Name _____ First Name _____ Social Security No. _____

Address _____ City _____ State _____ Zip _____

General Instructions

- STUDENTS:** complete the **STUDENT** section below, answering all questions **AND** complete the worksheet on the reverse side, checking all circumstances that apply.
- PARENTS:** complete the **PARENTS OF DEPENDENT STUDENTS** section below, answering all questions **AND** complete the worksheet on the reverse side, checking all circumstances that apply. If the parent is remarried, stepparent information is also required. This form must be signed and dated by both the student and parent(s) and returned to the Financial Aid Office, Rend Lake College, 468 N. Ken Gray Parkway, Ina, IL 62846.

STUDENT (AND SPOUSE, IF MARRIED)

Number of family members in 2009/2010 (include student, student's spouse and dependents) _____

Number of family members in college at least half time during 2009/2010 (include student) _____

Amount of student's (and spouse's) EXPECTED EARNINGS AND OTHER INCOME THAT IS TAXABLE FOR 01/01/09 THROUGH 12/31/09:

STUDENT'S \$ _____
 SPOUSE'S \$ _____
 TOTAL \$ _____

Source and amount of student's (and spouse's) EXPECTED UNTAXED INCOME AND BENEFITS FOR 01/01/09 THROUGH 12/31/09:
LIST SOURCES:

_____ \$ _____
 _____ \$ _____

PARENTS OF DEPENDENT STUDENT (if applicable)

Number of family members in 2009/2010 (include parent's and their dependents, including student) _____

Number of family members in college at least half time during 2009/2010 (include student) _____

Amount of parent's EXPECTED EARNINGS AND OTHER INCOME THAT IS TAXABLE FOR 01/01/09 THROUGH 12/31/09:

FATHER'S (or stepfather's) \$ _____
 MOTHER'S (or stepmother's) \$ _____
 TOTAL \$ _____

Source and amount of parent's EXPECTED UNTAXED INCOME AND BENEFITS FOR 01/01/09 THROUGH 12/31/09:
LIST SOURCES:

_____ \$ _____
 _____ \$ _____

CERTIFICATION:

All of the information on this form is true and complete to the best of my (our) knowledge. If asked by an authorized official, I (we) agree to give proof of the information that I (we) have given on this form. I (We) realize that this proof may include copies of income tax returns, unemployment benefits, public aid statements, or other income information. I (We) also realize that if I (we) do not supply proof upon request, the student may be denied financial aid.

Student's Signature Date

Father's (Stepfather's Signature) Date

Spouse's Signature Date

Mother's (Stepmother's Signature) Date

Student's Telephone Number

Parent's (Stepparent's) Telephone Number

COMPLETE CERTIFICATION ON REVERSE SIDE

WORKSHEET FOR STUDENTS

- ❑ Student worked full-time (at least 30 hours a week for at least 26 weeks in 2008, but is not working full-time now. Date full-time work ceased: _____)

- ❑ Student (or spouse), who earned money in 2008, has lost his or her job for at least 10 weeks in 2009. Date full-time work ceased: _____

- ❑ Student (or spouse), who earned money in 2008, has been unable (for at least 10 weeks in 2009) to earn money in the usual way. This must be a result of disability, natural disaster, or change in employment that occurred in 2008 or 2009. Explain the disability, natural disaster, or change in employment.

- ❑ Student (or spouse) who received unemployment compensation or some untaxed income or benefit in 2008, has completely lost that benefit for at least 10 weeks in 2009. The untaxed income or benefit must be from a public or private agency, from a company, or from a person because of a court order. (Do not include loss of veteran education benefits.)

Indicate the source and amount of untaxed income or benefits received in 2008.

Social Security Benefits (include SSI)	\$ _____
Court Ordered Child Support	\$ _____
Untaxed retirement or disability	\$ _____
Welfare Benefits	\$ _____
TANF	\$ _____
Other Sources	\$ _____

Date benefits were last received: _____
 Explain Loss: _____

- ❑ Student has already applied for financial aid, but since that time, the student and spouse have separated or divorced.

Circle Status **SEPARATED** **DIVORCED**
 Date of separation or divorce: _____

Student has already applied for financial aid, but since that time either: -- the student's spouse died
 -- the last surviving parent on whom the student was dependent has died

Date spouse or parent died:
 Month _____ Day _____ Year _____

WORKSHEET FOR PARENTS

- ❑ A parent (or stepparent whose income from work is reported) who earned money in 2008 has lost his/her job and remained unemployed for at least 10 weeks during 2009. Date full-time work ceased: _____

- ❑ A parent (or stepparent whose income from work is reported) who earned money in 2008, has not been able (for at least 10 weeks in 2009) to earn money in his/her usual way. This must be the result of disability, natural disaster, or change in employment that occurred in 2008 or 2009. Explain the disability, natural disaster, or change in employment.

- ❑ A parent (or stepparent whose untaxed income is reported) who received unemployment compensation or some untaxed income or benefit in 2008, has completely lost that income or benefits for at least 10 weeks in 2009. The untaxed income or benefit must be from a public or private agency, from a company, or from a person because of court order. (Do not include loss of veteran education benefits.)

Indicate the source and amount of untaxed income or benefits received in 2008.

Social Security Benefits (include SSI)	\$ _____
Court Ordered Child Support	\$ _____
Untaxed retirement or disability	\$ _____
Welfare Benefits	\$ _____
TANF	\$ _____
Other Sources	\$ _____
Date Benefits were <u>last</u> received	_____
Explain Loss:	_____

- ❑ Parents and/or stepparents, who provided parental data on the student's original financial aid application, have separated or divorced.

Circle Status: **SEPARATED** **DIVORCED**

Date of separation or divorce: _____

- ❑ A parent or stepparent, who provided parental data on the student's original financial aid application, has died. Date parent died:
 Month _____ Day _____ Year _____