

EDGEWOOD COLLEGE FINANCIAL AID

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2024-2025 DEPENDENT CONSIDERATION OF SPECIAL CIRCUMSTANCES

Page 1 of 2

Student Name:	Student ID#
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Complete this form only if you have already completed the 2024-2025 FAFSA (Free Application for Federal Student Aid). Please submit photocopies, as these documents will not be returned to you.

All types of special circumstances must complete steps 1-3 and supply acceptable documentation.

- 1. Please attach a detailed letter explaining your special circumstance.
- 2. Provide your and your parent's 2022 IRS tax return.
- 3. Complete Sections A & B and the signature section at the end.

PLEASE NOTE: Not all circumstances will result in an adjustment of aid. The Special Circumstance Committee ensures that federal, state, and institutional policies and regulations are upheld.

Types of Special Circumstances:

Below are some of the types of special circumstances that we can review. Please attach all required documents and submit to the Office of Financial Aid at the above address.

Circumstance	Acceptable Documentation	
Paid Medical/Dental expenses not covered by insurance	 IRS Form 1040, Schedule A Or Copies of cancelled checks or statements indicating amount PAID. 	
Reduction in income due to involuntary unemployment	 Complete the 2024 Student or Parent Expected Income section of this document. And Letter from employer indicating last date of employment And Final pay stub And Copy of Determination of Benefits Rights letter for unemployment 	
Loss of non-taxable income, such as Child Support or Worker's Compensation	Official statement of benefits with termination date	
Divorce, separation, or death of parent Date of Divorce/Separation:	 Divorce or legal separation agreement 2022 W2 forms Death Certificate 	
Private Elementary/Secondary Tuition Expenses	Copy of the tuition bill for the 2024-2025 academic year	
Unusual one-time income changes such as inheritance, capital gain, or catastrophic expense	Statement indicating the nature of this occurrence	
Parent enrolled at least half time in college	Copy of registration statement for 2024-2025	

A. Family Information- List the people in your parents' household, please include:

- Yourself even if you live on your own.
- Your parent(s) (including stepparent).
- Your siblings, step siblings, or others who live with your parents and your parents will provide more than half of their support from 7/1/2024 through 6/30/2025.

Full Name	Age	Relationship	College Name (for any household member attending at least half-time between 7/1/24 and 6/30/25, and will be enrolled in a degree, diploma, or certificate program)
Example: Martha Jones	20	Sister	Edgewood College
		Self	

B. EXPECTED 2024 INCOME (January 1, 20 income and ONLY for the individual afformation)	•	te ONLY if you are appealing due to loss of
Affected person(s): Name of individual(s) whose income has sig	gnificantly changed	
Monthly gross income from work (before deductions) Please Check: ☐ Student	Monthly income from benefit	In these spaces, the affected person will need to itemize their actual and/or
☐ Father ☐ Mother	☐ Unemployment benefit☐ Worker's compensation☐ Child support received(for all family members)	estimated total monthly gross income (before deductions) from work. If they will not have any income from work
Jan 2024 \$ Feb 2024 \$ Mar 2024 \$	Jan 2024 \$ Feb 2024 \$ Mar 2024 \$	please fill in blank(s) with a zero (0). If the affected person will be receiving
Apr 2024 \$	Apr 2024 \$ May 2024 \$ June 2024 \$	any of these benefits below, please indicate the amounts per month and total all columns that have monthly
Aug 2024 \$ Sept 2024 \$ Oct 2024 \$	July 2024 \$ Aug 2024 \$ Sept 2024 \$ Oct 2024 \$	amounts reported.
Nov 2024 \$ Dec 2024 \$	Oct 2024 \$ Nov 2024 \$ Dec 2024 \$	
All of the following are required:	Total	
☐ A detailed letter explaining my special circur	mstances	
☐ Your and your parent's 2022 signed IRS tax	return	
\square Please mark if you, the student, wer	re not required to file a 2022 federal ta	x return
\square Acceptable documentation to support my sp	pecial circumstance	
☐ A completed and signed copy of this form		
My signature below certifies that all information my knowledge. I understand that approval of tFAFSA.		
Student signature:	Date:	
Parent signature:	Date:	
After all required documents have been receive you would like the results copied to an addition		-
Additional email:		
Submit Materials to: Edgewood Central 1000 Edgewood College Dr. Madison, WI 53711		

Fax: 608-663-3495

Scan & Email: <u>ecentral@edgewood.edu</u>