

**Rochester Community and Technical College
2007-2008 Special Conditions Form**

Student's Name: _____ Social Security # _____ Stinger ID _____

A special condition is an unusual circumstance which results in a significant financial hardship for a family. A special condition may allow your 2007 income information to be used to calculate your eligibility for Federal and State aid because your family income will be substantially less in 2007 than it was in 2006. If your special condition does not result in \$500 or more in aid, the special condition may be denied. In such cases, the Financial Aid Director may recommend utilizing alternate sources of aid such as a loan. Refusal of a parent to provide support, unusual consumer debt, and temporary reduction of income are not special conditions.

**Petitions will not be accepted until January 2008 as you must
have filed a 2007 tax return.**

DIRECTIONS:

1. You must first submit the 2007-2008 FAFSA to the Federal Aid Program using 2006 information.
2. Check all special circumstances below, which apply to your financial hardship. You must provide a DETAILED written statement explaining your circumstance and the resulting financial hardship.
3. Attach verification from a third party if requested below.
4. Complete Verification Form for 2007-08; submit with 2006 and 2007 taxes attaching corresponding W-2's, and proof of all untaxed income.

Special Circumstance Resulting in Financial Hardship

LOSS OF JOB FOR AT LEAST SIX WEEKS IN 2007:

- A. Person who lost job: B. Describe job loss: Last day on the job: _____
[] Student [] Permanent loss? _____ How long employed? _____
[] Mother/stepmother
[] Father/stepfather [] Did or will you terminate job to attend RCTC? _____
[] Spouse of independent student

C. Attach a copy of your 2006 and 2007 tax forms with W-2's. Also your layoff notice, along with all benefits you may receive for retraining.

LOSS OF BENEFITS AND UNTAXED INCOME IN 2007:

- A. Person who lost the benefit, program or income: B. Please indicate name of lost benefit,
income or program: _____
[] Student [] Date of last check: _____
[] Mother/stepmother [] Total amount for year: _____
[] Father/stepfather [] Why did benefit end? _____
[] Spouse of independent student

C: Attach verification from source of funds, which will verify termination date and year to date amount received for Untaxed Income prior to termination.

- CHANGE OF HOUSEHOLD SIZE FROM _____ TO _____ BECAUSE OF
- DEATH (attach death certificate)
 - DIVORCE (attach divorce decree)
 - LEGAL SEPARATION (attach court ordered separation and/or letter from lawyer stating that divorce is in progress.)

Name and relationship of person no longer in household: _____

- A. Complete attached financial pages of FAFSA using your 2007 financial information. (Do not include information for any person who is no longer in your household.)
- B. Date this special condition occurred: _____
- C. Total of insurance policies: \$_____ (Insurance policy income is considered an asset on FAFSA.)
- D. If divorce or separation, please attach a copy of the divorce decree with financial terms or settlement. Note: You are required to provide stepparent financial information on financial aid forms.

NATURAL DISASTER:

Describe type of disaster: _____

- A. Date(s) disaster occurred: _____
- B. Official appraisal of property damage to your home: \$_____ Percent covered by insurance _____%
- C. Official appraisal of damage to all other property: \$_____ Percent covered by insurance _____%
- D. Other losses associated with the disaster: \$_____ Percent covered by insurance _____%
- E. Is there any collection action pending by you associated with this event? _____
If "yes", please explain: _____
- F. Did the disaster result in a substantial loss of employment? _____
- G. Attach verification (newspaper article, letters from insurance company, appraiser estimate, etc.)

- OTHER UNUSUAL CIRCUMSTANCE FOR CONSIDERATION: Please explain and provide verification of event or circumstance. Note: Because of new tax credits, elementary and secondary private school tuition is not an allowable special condition. An unusual circumstance involving a parent in college should be explained in this section. Also, the number in college is already considered in the Federal Need Analysis and may normally be updated only if the applicant is selected for verification. For catastrophic medical and dental expenses, attach a copy of your 2007 1040 Schedule A. [FA Office reminder: Catastrophic medical must exceed 11% of Income Protection Allowance.]

**** I certify that all of the information stated in the letters attached concerning my request are true and complete.**

Warning: If you purposely give false or misleading information on this form, you may be fined, sentenced to jail, or both.

Signature of student

Date

Signature of parent or spouse

Date