



OFFICE OF FINANCIAL AID
2020-2021 Request for Consideration of Special Circumstances



CFSPEC

Student Name: _____

NSHE ID: _____

Sometimes families experience circumstances, which merit recalculation of their financial aid eligibility based on 2019 tax year information rather than the federally required 2018-tax information. This form is designed to document those situations for review by the Office of Financial Aid. **Please be advised that all Professional Judgment appeal decisions are final.**

Section 1: INSTRUCTIONS

1. Complete and submit the Free Application for Federal Student Aid (FAFSA) for the current Award Year (i.e., 2020-2021)
2. Complete and submit this *Request for Consideration of Special Circumstances Form* to the Office of Financial Aid;
3. Complete and submit a Student Verification Worksheet, Group 1
 - ***Submit a copy of your 2018 and 2019 Tax Return Transcript (*2020 if after January 31st) and your parent’s 2018 and 2019* Tax Return Transcript (if a dependent student);**
 - ***Submit a copy of your/your spouse’s (if married) 2018 and 2019 Tax Return Transcript (2020 if after January 31st)**
4. Submit a typewritten, signed letter explaining your situation

Section 2: CIRCUMSTANCES

Please check [] the box beside the circumstances that apply to your situation and **submit** the required paperwork.

- Separation from Employment due to Layoff, Termination, or Disability for at least 10 weeks in 2019/2020**
 - * Letter from employer on company’s letterhead including last date of employment _____
 - * Unemployment benefits determination document (if applicable) _____
 - * Documentation of income for 2019/2020 (Tax Return Transcript), and ALL W-2/1099's _____

- Excessive non-reimbursed medical and/or dental expenses**
 - * Documentation of non-reimbursed medical and/or dental expenses OR _____
 - * Canceled checks verifying payments made in 2019/2020 OR _____
 - * Copy of Schedule A Form from 2019/2020 Federal Income Tax Return _____

- Loss or Reduction of 2019/2020 Income Source (one-time income, disability benefits, welfare benefits, child support)**
 - * Copy of Notification of benefits reduction/termination, including the effective date _____
 - * Documentation of 2019/2020 income (taxable and non-taxable) _____
 - * Letter explaining the type and amount of one-time income received in 2018 and not 2019/2020. _____

- Separation or Divorce which occurred AFTER applying for financial aid**
 - * Copy of court order, final divorce decree or legal separation agreement _____
 - * W2/1099 statements from both parties and a 2019/2020 Tax Return Transcript for both parties _____

- Death of a parent (or spouse) which occurred AFTER applying for financial aid**
 - * Copy of death certificate _____

- Other Unusual Circumstances**
 - * Please attach a detailed statement and include copies any additional documentation you would like the Financial Aid Administrator to consider if your family circumstances were not reflected above. _____



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Section 3: CERTIFICATION

I/we certify that the information provided on this form is complete and accurate to the best of my/our knowledge. I/we agree to provide more detailed documentation if required. If additional changes occur during the academic year that would alter the information provided on this form, I/we would immediately contact the Financial Aid Office at College of Southern Nevada.

I / We understand that failure to provide the required documentation will result in denial of this appeal. One parent signature is required if you are a dependent student. Purposely giving false or misleading information may result in federal fines, jail sentence, or both.

Student's Signature

Date

Spouse's Signature (if married) Date

Parent 1 Signature (if dependent)

Date

Parent 2 Signature (if dependent)

Date

FOR OFFICE USE ONLY – DO NOT WRITE IN THIS SPACE

PJ Approved? Student Notified? Verification Complete? ISIR Updated? TR number

Old EFC: New EFC:

Comments:

Multiple horizontal lines for handwritten comments.

FAA Signature: Date:



OFFICE OF FINANCIAL AID
2020-2021 Verification Worksheet 1



CFVWV1

Your 2020–2021 Free Application for Federal Student Aid (FAFSA) has been selected for the process called Verification. You must complete and sign this worksheet, attach any required documents, and submit them to the Financial Aid Office. After review, we may ask for additional information.

A. STUDENT INFORMATION

NSHE (Student) ID	LAST NAME	FIRST NAME	M.I.
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B. HOUSEHOLD/FAMILY INFORMATION

DEPENDENT STUDENT – A student is considered *Dependent*, if he/she was **required to provide parental data** on the FAFSA.

Please include in your household (below) the following:

- You and your parents/stepparents (*who provide more than half of your financial support*) even if the student does not live with parents.
- Your parent/stepparents’ dependent children, if your parent/stepparents’ will provide more than half of the children’s support from July 1, 2020 through June 30, 2021, or if the children would be required to provide parental information if they were completing a FAFSA for 2020-2021. Include children who meet either of these standards, even if a child does not live with the parents.
- List other people as part of your household **only** if they now live with **your parents AND they** provide more than half of their support **AND** will continue to provide more than half of their support through June 30, 2021.

INDEPENDENT STUDENT – A student is considered *Independent* if he/she was **NOT required to provide parental data** on the FAFSA.

Please include in your household (below) the following:

- You and your spouse, *if married*.
- The student’s or spouse’s children if the student or spouse will provide more than half of the children’s support from July 1, 2020 through June 30, 2021, even if the child does not live with the student.
- List other people as part of your household **only** if they now live with you **and** you provide more than half of their support and will continue to provide more than half of their support through June 30, 2021.

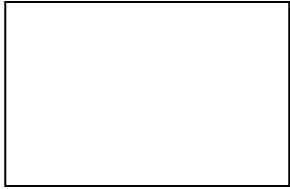
COLLEGE INFORMATION: If any household member will be attending college at least half-time between July 1, 2020 and June 30, 2021 and will be enrolled in an eligible degree or certificate program, write the full name of the college or university (**do not abbreviate**).

Full Name	Age	Relationship	College Name (do not abbreviate)
		<i>Self</i>	<i>College of Southern Nevada</i>

****If more space is needed, please provide an additional page with the student’s NSHE ID and name at the top of the page.**
****CSN may require additional documentation if we have reason to believe that the information regarding the household members enrolled in an eligible post-secondary institution is inaccurate.**



OFFICE OF FINANCIAL AID
2020 - 2021 Verification Worksheet 1



C. INCOME VERIFICATION

Complete this section if you (your spouse, if married) and/or your parents (if you are a dependent student) filed a 2018 income tax return with the IRS.

Student/Spouse	Parent(s)
<input type="checkbox"/> I/We have successfully used the FAFSA's IRS Data Retrieval Tool.	<input type="checkbox"/> I/We have successfully used the FAFSA's IRS Data Retrieval Tool.
<input type="checkbox"/> I/we am/are unable or chose not to use the FAFSA's DRT to transfer my/our income information. I have attached a copy of my/our Tax Return Transcript here.	<input type="checkbox"/> I/we am/are unable or chose not to use the FAFSA's DRT to transfer my income information. I have attached a copy of my/our Tax Return Transcript here.
<input type="checkbox"/> I/we did not and am/are not required to file a 2018 Federal Tax Return and will complete Sections D and E (if applicable) below.	<input type="checkbox"/> I/we did not and am/are not required to file a 2018 Federal Tax Return and will complete sections D and E (if applicable) below.

D. TAX RETURNS – NON FILERS

Complete this section if you, the student (and spouse, if applicable) and/or your parent(s) (if dependent) will not file and **are not required** to file a 2018 income tax return with the IRS, but earned income from work in 2018. If you are required to file a return, but have not, you must file your return in order to be considered for Federal Student Aid.

In the following table, please list all earnings from work during 2018 **and attach a 2018 W2 or 1099-MISC for each line item.** Your application cannot be considered complete until all earnings from work can be verified with a W2 or 1099-MISC.

Source of Income from Work in 2018	Student	Spouse/Parent(s)	IRS W-2 or 1099 Attached?
<i>Example: Tom's Auto Shop</i>	\$	\$ 5,500	<i>Yes or No</i>
	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No
	\$	\$	<input type="checkbox"/> Yes <input type="checkbox"/> No

E. VERIFICATION OF NON-FILING STATUS

If you (and your spouse, if applicable) and your parent(s) (if dependent) did not have any source of income from work in 2018 (i.e. did not file a tax return and no income was listed in Section D), **please complete the Dependent Student Support Form or Independent Student Support Form** (as appropriate) and submit a Verification of Non-filing letter from the IRS.

F. CERTIFICATION AND SIGNATURE(S)

I certify that all of the information reported on this worksheet is complete and correct. The student and one parent must sign this worksheet. **If you purposely give false or misleading information, you may be fined, sent to prison, or both.**

Student's Signature

Date

Parent's/Spouse's Signature

Date