

SPECIAL CIRCUMSTANCE APPLICATION Independent Student for 2025-2026

According to federal laws and regulations, a family's 2023 income is used to assess financial need for the 2025-2026 school year. If a family's 2023 income is significantly lower, due to special circumstances, a financial aid administrator may be able to use 2023 income to assess financial need. Your special circumstance application will be returned if all requested information outlined is not provided. Special circumstances, if accepted, may result in an increase in need-based loans, student employment, or in certain cases, additional grant assistance. *Turnaround time for special circumstance appeals is 2-4 weeks*.

STUDENT INFORMATION					
Last Name		First Name	Student or Star ID#		
Phone Number	E-mail Address				
SECTION 1: CHANGE IN HOUSEHOLD SIZE that occurred after filling your FAFSA					
DEATH OF SPOUSE					
Attach an IRS Tax Return Transcript of your 2023 Federal Income Tax Return, including W-2 statements for both you and your spouse, if not already provided. If you have already provided your/spouse tax return, check this box:					
☐ Please provide a written statement indic DIVORCE OR SEPRATION OF STUDENT	•				
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Attach an IRS Tax Return Transcript of your 2023 Federal Income Tax Return, including W-2 statements for both you and your spouse, if not already provided. If you have already provided your/spouse's tax return, check this:					
Attach a copy of the divorce decree or p	roof of separa	ation (e.g., court order, statement from attorney or cle	rgy).		
If you have children, attach a written statement identifying the custodial parent. Also, provide the names, ages, and the relationship of any family members that the custodial parent will support through June 30, 2026.					
Indicate the amount, if any, your former spouse will/has provide(d) toward your college costs at South Central College for 2025-2026 school year. \$					
SECTION 2: EDUCATIONAL EXPE	ENSES				
PRIVATE TUITION EXPENSES AT ELEM	ENTARY OI	R SECONDARY SCHOOL			
Attach a copy of the 2023 or 2024 tuition statement, outlining costs and financial aid awarded, for each dependent child attending private elementary or secondary school (do not include expenses for the child who will be enrolling in college in 2025-2026).					
☐ If you are divorced and the non-custodial parent provides assistance toward the private tuition at the elementary or secondary school(s), provide a statement indicating the amount of assistance.					
SPOUSE'S PERSONAL COLLEGE LOAN PAYMENTS					
Attach a written statement indicating the college loans your spouse is repaying and a copy of your spouse's billing statement or payment coupon. Include only the loans your spouse has borrowed for his/her educational expenses and the monthly amount due. Be sure to total al loan payments after they are detailed.					
SECTION 3: MEDICAL/DENTAL/DEPENDENT CARE EXPENSES not reimbursed or covered by insurance					
	teria plan) for	it-of-pocket medical, dental, and dependent care exphealth/dental insurance premiums, doctor, hospital, bey are detailed.			
Attach an IRS Tax Return Transcript of already provided.	your 2023 Fe	deral Income Tax Return, including Schedule A if yo	u itemized deductions, if not		

OR

Return by mail or fax:

Fax: (507) 389-7419

Faribault Campus

South Central College

Financial Aid Office

1225 Third Street SW

Faribault, MN 55021

032825

North Mankato Campus

North Mankato, MN 56003

South Central College

Financial Aid Office

1920 Lee Boulevard

SECTION 4: CHANGE IN INCOME						
DISABILITY OF STUDENT/SPOUSE						
Attach a written statement from the attending physician outlining the disability and the probability of returning to work. Please include an estimated date of return, if applicable.						
☐ If the disability is work related, provide documentation from your/your spouse's employer or government agency on availability and amount of worker's compensation benefits and/or short-term or long-term disability insurance benefits for 2023.						
Attach a copy of your/your spouse's most recent paystub(s) from all emp (e.g., weekly, bi-weekly, monthly).	loyers. Please indicate of	n the paystub the length of	of the pay period			
☐ Attach an IRS Tax Return Transcript of your 2023 Federal Income Tax F	Return, including W-2 fo	orms for you and your spo	ouse (if applicable).			
☐ Complete the Student/Spouse Income Source Table below to ensure in	clusion of all income sou	rces.				
STUDENT/SPOUSE UNEMPLOYED						
Attach a written statement indicating the date and reason student and/or s	pouse became unemploy	red.				
Attach a copy of each of student and/or spouse's most recent paystub(s) from all employers. Please indicate on the paystub the length of the period (e.g., weekly, bi-weekly, monthly).						
Attach a copy of unemployment benefits student and/or spouse will recei	· ·					
Attach an IRS Tax Return Transcript of student and/or spouse's 2023 Fee			its.			
Complete the Student/Spouse Income Source Table below to ensure in						
A BUSINESS OR FARM HAS CLOSED DUE TO BANKRUPTCY, FOREC	CLOSURE, OR NATU	RAL DISASTER				
☐ Attach a copy of the bankruptcy or foreclosure notice, if applicable.						
Attach a written statement outlining the particular circumstances surrounding this event. If the event was a natural disaster, please itemize the losses/damages that will not be covered by insurance or government assistance.						
☐ Attach an IRS Tax Return Transcript of your 2023 Federal Income Tax F			use (if applicable).			
☐ Complete the Student/Spouse Income Source Table below to ensure in	clusion of all income sou	irces.				
REDUCTION IN EARNINGS OR LOSS OF OTHER INCOME 2025 income will be less than 2023 FAFSA income. This could include a reducti etc. In general, we do not consider changes in income due to loss of overtime, on winnings or losses.						
Attach a written statement outlining the reason for the loss of income, including COVID 19 related loss of income, the amount of income that was lost or reduced, and the date the change became effective.						
Attach a copy of your/your spouse's most recent paystub(s) from all employers . Please indicate on the paystub the length of the pay period (e.g. weekly, bi-weekly, monthly).						
Attach an IRS Tax Return Transcript of your/your spouse's 2023 and 202 (if applicable).			ou and your spouse			
☐ Complete the Student/Spouse Income Source Table below to ensure in	clusion of all income sou	rces.				
STUDENT/SPOUSE INCOME SOURCE TABLE	Actual:	Estimated:	Total:			
January 1, 2025 through December 31, 2025	1/1/25 to Today's Date	Today's Date to 12/31/25	Actual plus Estimated			
Student's gross earnings from work (wages, salary, tips, etc.) *						
Spouse's gross earnings from work (wages, salary, tips, etc.) *						
Business/Farm Income Interest/Dividend Income. Specify source and value: \$						
Unemployment Compensation						
Severance Pay						
Capital Gains						
Spousal Maintenance						
Child Support						
Taxable Social Security Benefits						
Short-term or Long-term Disability Benefits						
Worker's Compensation						
Withdrawal from retirement account						
Other Income (pension, annuity, rental income, housing allowance, bonuses, etc.						
*Attach most recent paystub(s) for you and your spouse when submitting your appeal.		<u> </u>				
SECTION 5: Sign this Worksheet						
By signing this worksheet, I certify that all the information reported on this form in misleading information on this worksheet, you may be fined, sentenced to jail,		WARNING: If you purp	posely give false or			
Student Signature X		Date:				