



**DePaul University**  
**Office of Financial Aid At DePaul Central**  
**2019-2020 Special Circumstance Appeal:**  
**Income Changes and Special Expenses - Independent Students**  
**(for students that do not report parent information on the FAFSA)**  
**DePaul Central Locations:**  
 Telephone (312) 362-8610 Fax (312) 362-5748  
 This form may be faxed, or mailed, or submitted by using our secure document upload website at  
<https://wdat.is.depaul.edu/FAUpload/default.aspx>

Last Name	First Name	Date of Birth	DePaul ID
<b>Select Your College:</b>			
<input type="checkbox"/> Business <input type="checkbox"/> CDM <input type="checkbox"/> Communication <input type="checkbox"/> Education <input type="checkbox"/> Liberal Arts/Social Sciences <input type="checkbox"/> Music <input type="checkbox"/> Science/Health <input type="checkbox"/> SNL <input type="checkbox"/> Theatre			
<b>Select your Status:</b>			
First-year freshman <input type="checkbox"/> First-year transfer <input type="checkbox"/> Continuing student <input type="checkbox"/>			

**Instructions**

This form should be used for appeals related to changes in your family's financial circumstances after the completion of the FAFSA, and/or payment of special expenses, as explained below. Submit this form and all requested documentation to the Office of Financial Aid. You must complete section 4 - Certification and Signature.

**Special Notes: Verification of your 2017 income is required as part of the appeal process. If you have not already used the IRS Data Retrieval when you filed the FAFSA, you will need to complete one of the steps below.**

- Log into your 2019-20 [FAFSA](#) to complete the IRS data retrieval process (preferred method), or
- Submit a signed copy of student and spouse (if filed separately) 2017 federal tax return(s). If you don't have a copy, request a 2017 federal tax return transcript, available at [www.irs.gov](http://www.irs.gov).

**If you have been selected for federal verification in 2019-20, you must complete that process before your appeal can be reviewed.**

<b>Section 1: Check the circumstance that applies to you</b>			
<input type="checkbox"/> <b>Change in Employment</b> If your family's 2019 or 2020 income will be significantly different from the 2017 income you reported on your FAFSA because of unemployment, retirement, or a reduction in hours, check this box and supply the requested documentation.  <b>Unemployment/Reduction in hours must have occurred a minimum of 10 weeks prior to submission.</b>	<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr style="background-color: #f2f2f2;"> <th style="text-align: center; padding: 5px;">Required Documentation</th> </tr> </thead> <tbody> <tr> <td style="padding: 5px;">           1. Describe your changed circumstances in Section 2 (attach a separate sheet if necessary) and complete the projected income grid in Section 3; <i>and</i>,            2. Provide the appropriate documentation below:  <b>Required documentation for unemployment or retirement:</b> <ul style="list-style-type: none"> <li>■ Signed letter from employer on company letterhead verifying separation from employment, including the date of hire and date of separation. Job loss must be a minimum of 10 weeks.</li> <li>■ You final paycheck stub.</li> <li>■ If receiving unemployment or retirement benefits, submit a copy of the benefit statement.</li> <li>■ If separated from more than one employer, submit a letter of separation from <i>each</i> employer.</li> </ul> <b>Required documentation for reduction in hours:</b> <ul style="list-style-type: none"> <li>■ A letter from the employer explaining the projected hours, hourly rate of pay and effective dates of the income change.</li> <li>■ The most recent paycheck stub from the household member experiencing the reduction of hours and income.</li> </ul> </td> </tr> </tbody> </table>	Required Documentation	1. Describe your changed circumstances in Section 2 (attach a separate sheet if necessary) and complete the projected income grid in Section 3; <i>and</i> , 2. Provide the appropriate documentation below: <b>Required documentation for unemployment or retirement:</b> <ul style="list-style-type: none"> <li>■ Signed letter from employer on company letterhead verifying separation from employment, including the date of hire and date of separation. Job loss must be a minimum of 10 weeks.</li> <li>■ You final paycheck stub.</li> <li>■ If receiving unemployment or retirement benefits, submit a copy of the benefit statement.</li> <li>■ If separated from more than one employer, submit a letter of separation from <i>each</i> employer.</li> </ul> <b>Required documentation for reduction in hours:</b> <ul style="list-style-type: none"> <li>■ A letter from the employer explaining the projected hours, hourly rate of pay and effective dates of the income change.</li> <li>■ The most recent paycheck stub from the household member experiencing the reduction of hours and income.</li> </ul>
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Last Name	First Name	DePaul ID:
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<input type="checkbox"/> <b>Loss of Household Income</b> (Divorce, Separation, Loss of Spouse): If your family's 2019 or 2020 income will be significantly different from the 2017 income you reported on your FAFSA because of divorce or separation, or death of a spouse, check this box and supply the requested documentation.	<ol style="list-style-type: none"> <li>Describe your changed circumstances in Section 2 (attach a separate sheet if necessary and complete Section 3; <i>and</i>,</li> <li>Provide the appropriate documentation below:           <ul style="list-style-type: none"> <li>■ <b>For Divorce/Separation:</b> Submit a copy of divorce decree, or documentation indicating separate residences (e.g. separate leases, bills), and the 2017 W-2 for you and your spouse.</li> <li>■ <b>For Loss of Spouse:</b> Submit a copy of death certificate. If there is a life insurance benefit, also provide that information. Include any additional information in Section 2.</li> </ul> </li> </ol>
<input type="checkbox"/> <b>Loss/Termination of Benefit(s)</b> (Social Security benefits, Supplemental Security Income (SSI), Child Support, etc.)	<ol style="list-style-type: none"> <li>Describe your changed circumstances in Section 2 (attach a separate sheet if necessary), and complete Section 3; <i>and</i></li> <li>Submit documentation from issuing agency certifying termination of benefit, including effective date of termination.</li> </ol>
<input type="checkbox"/> <b>Loss of One-Time Income</b> (Early distribution of an IRA due to hardship, divorce settlement, inheritance, etc.	<ol style="list-style-type: none"> <li>Describe your changed circumstances in Section 2 (attach a separate sheet if necessary).</li> <li>Submit copies of all relevant federal 2017 1099 forms and any additional supporting documentation.            Note: our office will not consider income adjustments based on winnings.</li> </ol>
<input type="checkbox"/> <b>IRA and/or Pension Rollover</b>	If you had a 2017 IRA and/or Pension Rollover that is being reported as untaxed income on your FAFSA, submit a copy of your 2017 1099 form and provide an explanation in Section 2.
<input type="checkbox"/> <b>Medical/Dental Expenses in 2017</b> (Must be non-reimbursed expenses not covered by insurance.)	<p><b>Enter the total amount paid in non-reimbursed medical/dental expenses not covered by insurance in 2017: \$ _____ . Explain if these expenses are ongoing in Section 2.</b></p> <ul style="list-style-type: none"> <li>■ Submit copies of receipts for <i>non-reimbursed</i> medical/dental expenses.</li> <li>■ Submit a copy of your Schedule A (only) – Itemized deductions, if available.</li> <li>■ If these or other medical expenses have continued into 2019, provide detailed information.</li> </ul> <p>Note: Our office uses a federal formula to determine the allowable percentage of these expenses that may be considered.</p>

**Section 2: Provide an explanation of your family's special circumstances below. Attach a separate page if necessary:**

