

Southeastern Illinois College Financial Aid Office 3575 College Rd. Harrisburg, IL 62946 Phone: (618) 252-5400 Fax: (618) 252-3062

2022-2023
Special Circumstances
Parent

Complete this form **AFTER** receiving the **2022-2023** Student Aid Report. If you have been chosen for verification, that process must be completed **BEFORE** this Special Circumstance appeal is considered. **ALL DOCUMENTATION REQUESTED** must be delivered to the address above. Failure to supply documentation will delay your appeal. Appeals are reviewed weekly. You will be notified in writing of the decision. This form **MUST** be completed, signed and dated by the student. **If submitting after December 31, 2022, submit 2022 W-2 Wage and 2022 U.S. Federal Tax Return.**

Email: fao@sic.edu

Section A- Student Information (Please print clearly)

Last Name	e First Name		M.I	Student ID Number			
Address				Date of Birth			
City		State	Zip Code	Phone Number			
Sectio	on B- Financial Informa	ntion					
Number	of family members in 2022-2023 ((include student, st	tudent's parents, and d	ependents):			
Number	of family members in college at le	ast half-time durin	ng 2022-2023 (include	student):			
or s	salary at current employment. The considered. Date of termination/lapovide appropriate documentation:	decrease in incomyoff or change incomyoff or change incomplete pay stubs from a mployment benefit 401k, IRA, stocks/	e must be at least \$2,0 ome:loyer(s) on company least surrent employments received/to be received bonds, pensions, or other contents and the surrent employments received.	ed. ner assets converted to cash.			
20° <u>Pro</u> •	Reduction or loss of other taxable income/benefits in 2021 or 2022: Parent/step-parent has experienced loss in unemployment benefits, alimony, or other taxed income. The decrease in income must be at least \$2,000 and at least 20% of total income to be considered. Provide appropriate documentation: • Proof of the amount and type of income lost. • A copy of the current pay statement showing gross year to date wages from each job worked for both parents.						
sup <u>Pro</u> •	pport, veteran's noneducation bene ovide appropriate documentation: Submit proof of the amount and ty	fits, workers comp	pensation, or other unta	parent has experienced loss in child axed income. ges from each job worked for both			

]	Separation or Divorce in 2020 or 2021 or 2022: Student has already applied for financial aid, but since that time the student's parents have separated or divorced. Date of separation or divorce:
	Provide appropriate documentation:
	 A copy of the court order or if separated, provide utility bills or other acceptable mail from both parents showing different addresses.
	 Proof of spousal support and/or child support received and/or anticipated in 2020 or 2021.
)	Death of Parent (if dependent) in 2021 or 2022: Student has already applied for financial aid, but since that time
	the student's parent has deceased.
	☐ Mother/step-mother: Date of loss:
	☐ Father/step-father: Date of loss: Provide appropriate documentation:
	A copy of the death certificate or obituary.
	 2021 income information for deceased, including a copy of the last pay statement showing gross year-to-date
	wages from each job worked.
	 Surviving parent's 2021 income information, including a copy of the current pay statement from each job.
	• A copy of life insurance and/or survivor benefits.
	Medical or dental expenses in 2021: Parent/step-parent paid for medical or dental expenses not covered by
	insurance that exceed 12% of total income.
	Provide appropriate documentation:
	• A copy of Schedule A of Federal 2020 tax returns or copies of cancelled checks for 2020 and confirmation o
	total amount paid by insurance in 2020.
	Other catastrophic event in 2020, 2021 or 2022 not covered by this form.
	Viller Calasti Obilic event in 2020, 2021 or 2022 not covered by this form.
	Provide appropriate documentation:
	 <u>Provide appropriate documentation:</u> Official reports, invoices, and receipts of expenses paid by the family not covered by insurance.
	 <u>Provide appropriate documentation:</u> Official reports, invoices, and receipts of expenses paid by the family not covered by insurance.
	 Provide appropriate documentation: Official reports, invoices, and receipts of expenses paid by the family not covered by insurance. A copy of the statement(s) from the insurance company of any paid or denied claims.
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Section D- Expected Total Income and Benefits Table

Student's signature

Parent's signature

Please report the household's projected taxable and untaxed income for 2022, including business income, rental income, pension, 401k/IRA distributions, social security, disability, child support, spousal support, and all other types of income. Answer each line with the gross amount or "zero" if it does not apply. *This form will not be processed if incomplete*.

TAXABLE INCOME FROM WAGES	FATHER	MOTHER	STUDENT
January 1, 2022-December 31, 2022			
Gross wages earned today's date			
Estimate anticipated wages			
OTHER TAXABLE INCOME			
Unemployment Compensation			
Severance, Paid Time Off, or Vacation Pay out (not included in gross wages)			
Social Security Income			
Taxable Disability Income			
Taxable Pension			
Interest/Dividend Income			
Business Income, Rents, Royalties, and/or Annuities			
Maintenance/support from spouse (if separation/divorce)			
Taxable income from 401k disbursements or other existing assets			
Other taxable income (survivor benefits, lump sum payment, etc.)			
TYPES OF UNTAXED INCOME			
Workers Compensation			
Child support Received for all members of your household			
Housing allowance for military or clergy			
Untaxed pension			
Untaxed disability income			
Other untaxed income			
TOTAL 2022 INCOME FROM ALL SOURCES			
Section E- Signatures			

Date

Date