
Special Circumstance Review – Independent Student 2024-2025 Award Year

Instructions: If your family’s income is significantly less than the family income on the FAFSA, please complete this packet and return it to the Office of Financial Aid for review of your family’s financial situation. The packet **must** include the following completed in their entirety (*Requests submitted without documentation will not be evaluated*):

****Make sure student EMPLID is on ALL submitted pages and documents****

- A detailed statement describing the family situation and any other pertinent information. (pg. 2 of packet)
- Documentation supporting and verifying the reason for income review. See list of acceptable documentation (pg. 3 of packet).
- A completed Projected Income Chart. (pg. 6 of packet) Types of income to report are on pg. 4.

Important Information-As part of the review, we may request additional documentation.

- Resolve any outstanding items in your “To Do List” in SIS.
- We will post messages to the student’s Message Center (in SIS) if they student needs to take additional action and upon completion of the review.
- As part of the review, we may request additional documentation.
- The VWCC Financial Aid Office determines special circumstance reviews on a case-by-case basis, and decisions are final.
- There is no guarantee that a review will result in a change in aid eligibility.
- Please allow at least 10 business days for processing.

Student Information:

Student’s Name

EMPLID #

Special Circumstance Review Reason(s): (*Check all that apply and attach supporting documentation*)

Loss of full-time employment.

Date reduction is effective: _____

Disability of student or spouse.

Date disability began: _____

Divorce or Separation.

Date of occurrence: _____

Untaxed income has ceased or been reduced.

Date reduction effective: _____

Death of a principal wage earner (Spouse).

Other circumstances causing a large decrease in family resources during the year.

Financial Aid Office Chapman Hall Room 106 | 3094 Colonial Avenue Roanoke, Virginia 24015 | Phone: 855-874-6690

Please provide a detailed description of the family situation below. If you need more space, you can attach additional pages:

I certify that all information submitted on and with this application is complete and accurate. I have attached the appropriate supporting documents as required by the U.S. Department of Education. **Warning:** If you purposely give false or misleading information in this packet, you may receive a fine, serve jail time or both.

Student's Signature

Student EMPLID

Date

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Acceptable Forms of Documentation

(Please provide as much documentation as possible to support your reason for this submission.)

****Reminder: Student EMPLID must be listed on any documentation submitted with this packet****

Reduction in Income

- Certification of last day of employment or reduction in hours from the employer.
- W2 and/or 1099 forms. In the case of divorce or separation, attach only forms that include your name (solely or jointly).
- Last two (2) pay stubs, showing year-to-date earnings or a statement from the employer indicating the amount earned to date the statement must indicate if you are paid weekly, bi-weekly or monthly.
- Statement of eligible unemployment benefits.
- Certification from a third party the amount of funds they pay on your behalf.
- Any additional documentation that supports the reason for this Special Circumstance Review.
- 2023 Federal Tax return(s), including all schedules, if there is a significant change from 2022 Federal Tax return(s), if you have filed. You should include IRS form 1040 (or 1040NR/SR) and schedules 1, 2 and 3, if they were used.

Divorce or Separation

- Verification of divorce or separation that indicates you and your spouse are living separately.
- Divorce/Separation decree.
- W2 and/or 1099 forms. In the case of divorce or separation, attach the forms that include your name (solely or jointly).
- Any additional documentation that supports your reasoning for this Special Circumstance Review.

Death of principle wage earner

- Death certificate.
 - W2 of principle wage earner.
 - Any additional documentation that supports reasoning for this Special Circumstance Review.
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Types of Income

Work Income: includes all wages, salaries and tips. (Gross Income)

Other taxable income includes:

- Interest and dividend income
- Alimony, Severance pay
- Business and Farm income, Capital gains
- Taxable portion of Pensions and annuities (excluding rollovers)
- Income for rents after mortgage, tax and insurance payments
- Social Security
- Railroad Retirement
- All other taxable income not reported elsewhere on the form

Untaxed income includes:

- Payments to taxed deferred pensions and savings plans (paid directly or withheld from earnings) as reported on your paystub(s) or W-2(s). Include untaxed portions for your 401 (k) and 403(b) plans.
- Social security benefits (SSI or disability) received by the student, spouse, and other family members.
- Welfare benefits including AFDC and TANF (excluding food stamps)
- Retirement or disability benefits
- Untaxed portion of pensions/annuities
- Worker's Compensation
- Housing, food and other living allowances (excluding subsidies for low-income housing) paid to members of the clergy, military and others (including cash payments or cash value of benefits)
- Child support or maintenance for the student and/or for all other members of the family.
- Veteran benefits such as GI Bill, death pension, Dependency and Indemnity Compensation (DIC), etc.
- Earned Income Credit
- Any other untaxed income and benefits such as Black Lung Benefits, Refugee Assistance, Untaxed portion of Railroad Retirement Benefits, VA Educational Work Study Allowance, or wages not subject to taxation by any government, etc.
- Cash or money paid on your behalf, not reported elsewhere on the form.

Ways to Submit:

- (1) Upload the form at mysupport.viriniawestern.edu.
- (2) Drop off in-person at the Financial Aid Office in Chapman Hall.
- (3) Submit via email to finaid@viriniawestern.edu

Student Name: _____

EmpID: _____

EACH SECTION MUST BE COMPLETED (SPOUSE IF APPLICABLE) – Enter 0.00 if no amount to report for Anticipated Income section.

Anticipated Income Per Month	July 2024		August 2024		September 2024	
	Student	Spouse	Student	Spouse	Student	Spouse
Work Income						
Unemployment Benefits						
Other Taxable Income						
Untaxed Income						
TANF						
Support from Family/Friends						
Total Projected Income						

Anticipated Income Per Month	October 2024		November 2024		December 2024	
	Student	Spouse	Student	Spouse	Student	Spouse
Work Income						
Unemployment Benefits						
Other Taxable Income						
Untaxed Income						
TANF						
Support from Family/Friends						
Total Projected Income						

Anticipated Income Per Month	January 2025		February 2025		March 2025	
	Student	Spouse	Student	Spouse	Student	Spouse
Work Income						
Unemployment Benefits						
Other Taxable Income						
Untaxed Income						
TANF						
Support from Family/Friends						
Total Projected Income						

Anticipated Income Per Month	April 2025		May 2025		June 2025	
	Student	Spouse	Student	Spouse	Student	Spouse
Work Income						
Unemployment Benefits						
Other Taxable Income						
Untaxed Income						
TANF						
Support from Family/Friends						
Total Projected Income						