

Special Circumstance Review - Independent Student 2026-2027 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 the income review. See list of acceptable documentation. (Pg. 3 of packet)
- A completed Projected Income Chart. (Pg. 5 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 the 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 circumstances 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.)*

<input type="checkbox"/>	Loss of full-time employment	Date reduction is effective:	_____
<input type="checkbox"/>	Disability of student or spouse	Date disability began:	_____
<input type="checkbox"/>	Divorce or Separation	Date of occurrence:	_____
<input type="checkbox"/>	Untaxed income has ceased or been reduced	Date reduction effective:	_____
<input type="checkbox"/>	Death of a principal wage earner (Spouse)		
<input type="checkbox"/>	Other circumstances causing a large decrease in family resources during the year		

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

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 gross earnings or a statement from the employer indicating the gross amount earned to date and the statement must indicate if you are paid weekly, bi-weekly or monthly.
- Statement of eligible unemployment benefits.
- Certification from a third party of the amount of funds they pay on your behalf.
- Any additional documentation that supports the reason for this Special Circumstance Review.
- 2025 Federal Tax return(s), including all schedules, if there is a significant change from 2024 Federal Tax return(s), if you have filed. You should include IRS form 1040 (or 1040NR/SR) and schedules 1, 3 and C 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 or obituary.
- W2 of principle wage earner.
- Any additional documentation that supports reasoning for this Special Circumstance Review.

Types of Income

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

Other taxable income includes:

- | | |
|---|--|
| 1. Interest and dividend income | 5. Income for rents after mortgage, tax and insurance payments |
| 2. Alimony, Severance pay | 6. Social Security |
| 3. Business and Farm income, Capital gains | 7. Railroad Retirement |
| 4. Taxable portions of Pensions and Annuities (excluding rollovers) | 8. All other taxable income not reported elsewhere on the form |

Untaxed income includes:

9. Payments to tax 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.
10. Social security benefits (SSI or disability) received by the student, spouse, and other family members.
11. Welfare benefits including AFDC and TANF (excluding food stamps)
12. Retirement or disability benefits
13. Untaxed portion of pensions/annuities
14. Worker's Compensation
15. 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 benefits)
16. Child support or maintenance for the student and/or for all other members of the family
17. Veteran benefits such as GI Bill, death pension, Dependency and Indemnity Compensation (DIC), etc.
18. Earned Income Credit
19. 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.
20. Cash or money paid on your behalf, not reported elsewhere on the form.

Ways to Submit:

- (1) Upload through VWCC Secure Document Uploader found at www.virginiawestern.edu/students/uploads/
- (2) Drop off in-person at the Virginia Western Community College Financial Aid Office.

Student Name: _____

EmplID: _____

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 2026		August 2026		September 2026	
	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 2026		November 2026		December 2026	
	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 2027		February 2027		March 2027	
	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 2027		May 2027		June 2027	
	Student	Spouse	Student	Spouse	Student	Spouse
Work Income						
Unemployment Benefits						
Other Taxable Income						
Untaxed Income						
TANF						
Support from Family/Friends						
Total Projected Income						