



2021-2022 Special Circumstance Application

According to federal laws and regulations, a family's 2019 income is used to assess financial need for the 2021-2022 school year. If a family's 2021 income is at least 25% less than the 2019 actual income, the applicant may be eligible for consideration of special circumstances. Please provide information regarding your income reduction by completing this form. **Incomplete requests will not be processed; submission of this form does not guarantee financial aid eligibility.**

FAX: 254-526-1480 EMAIL: financial.aid@ctcd.edu

CTC ID

Last Name

First Name

Middle Name

Phone Number

*If any of your information above needs to be updated, you must submit the **Name or Social Security Number Change form**, located in Eforms/Etrieve.

(If you are a dependent student a parent must fill out this form.)

Parent Last Name

Parent First Name

Parent Phone Number

WARNING: If you purposely give false or misleading information, you may be fined, be sentenced to jail, or both.

FOR OFFICE USE ONLY

Prior year special circumstances: Yes _____ No _____

Special circumstance denied

Old EFC _____ ISIR# _____

Special circumstance approved

New EFC _____ ISIR# _____

COMMENTS: _____

Supervisor: _____

Date: _____

YOU MUST ATTACH DOCUMENTATION OF ALL INCOME & EXPENSES

Documentation could include current/last pay stubs with year-to-date earnings, current/last LES, a letter from an employer stating your total earnings, an estimate of future income, etc. If **no longer working in 2021** attach letter from employer showing last effective date of employment. For **unemployment benefits** need a letter from the Unemployment Office with effective date of approval/denial. **After December 31, 2021**, you will be required to file the 2021 federal tax return. The **required documents after December 31, 2021** will be the 2021 IRS Tax Return Transcript (<https://www.irs.gov/>) or 2021 signed Income Tax Return (Form 1040 and applicable Schedules) and the 2021 W-2 forms (if misplaced W-2s request an IRS Wage & Income (W-2) Transcript at <https://www.irs.gov/>).

	ACTUAL (1-1-21 - Present)	ESTIMATE (Today - 12-31-21)	TOTAL (Actual + Estimate)
Taxable Income From Work			
Student: income earned from work (wages, salaries, net income/loss from business/farm)	\$	\$	\$
Spouse: income earned from work (wages, salaries, net income/loss from business/farm)	\$	\$	\$
Father/Stepfather: income earned from work (wages, salaries, net income/loss from business/farm)	\$	\$	\$
Mother/Stepmother: income earned from work (wages, salaries, net income/loss from business/farm)	\$	\$	\$
Other Taxable Income (AGI)			
Dividends and Interest Income	\$	\$	\$
Alimony received	\$	\$	\$
Capital gains/loss (Schedule D)	\$	\$	\$
Taxable portions of pension/annuity withdrawals	\$	\$	\$
Income from rentals, royalties, partnerships, trusts	\$	\$	\$
Unemployment Compensation	\$	\$	\$
Taxable portions of Social Security	\$	\$	\$
Other taxable income:	\$	\$	\$
Untaxed Income			
Child support received	\$	\$	\$
Veterans' benefits (Disability, Death Pension, Dependency & Indemnity Compensation, or Educational Work-Study) not including educational benefits	\$	\$	\$
Housing Allowance (clergy only) and Food Allowance (clergy & military)	\$	\$	\$
Other untaxed income (worker's comp, etc):	\$	\$	\$
Expenses			
Child support paid	\$	\$	\$
Unexpected excessive medical expenses:	\$	\$	\$

Household Information: Start with the student then spouse/parents and any children/siblings in the household.

Full Name	Age	Relationship to the Student	Name of College If Enrolled in at least ½ time

Please summarize your special circumstances below (if you need more space, attach a separate page):

Certification:

I certify that the information provided above is true and complete to the best of my knowledge. I agree to provide proof of the information that I have given on this form if asked by the Office of Financial Aid. I also realize that if I do not provide proof when asked, the student will not receive special circumstances consideration. **(If you are a dependent student then one parent must sign.)**

Student's Signature: _____

Date: _____

Parent's Signature: _____

Date: _____