Special Circumstance Petition for 2019-2020

February 1, 2020

Federal regulations require the Office of Financial Aid to use 2017 financial information from the FAFSA when determining financial need for the 2019-2020 school year. This form may be used if you feel that the FAFSA does not adequately reflect your financial condition.

Please complete all four sections of this petition and return it to the Office of Financial Aid with all required documentation. NOTE: If documentation is not submitted with the petition, your request cannot be processed.

Section 1: Student and Parent Information

<table>
<thead>
<tr>
<th>Student Name (Last, First, M.I.)</th>
<th>Morehouse College ID Number</th>
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Section 2: Please Check All That Apply

_______ Loss of income due to non-disability unemployment – Student, spouse or parent(s) has lost employment (due to layoff, termination, or involuntary resignation) since the last tax year reported on most recent FAFSA. If unemployment is temporary and individual is actively seeking employment, you must wait six months after date of unemployment before submitting Special Circumstances Petition.

1. Who has been out of work? Name: ___________________________ Relation to student: ___________________________

2. Dates of unemployment: From: ___________________________ To: ___________________________

3. Acceptable Documentation:
   - Evidence of loss of employment (such as a termination notice or signed official letter from employer on company letterhead) or proof of bankruptcy and financial statements (self-employed only) AND
   - Copy of unemployment check(s) or pay stub (or letter stating that unemployment was denied) AND
   - SIGNED copy of 2017 Federal IRS Tax Return Transcript AND 2018 Federal IRS Tax Return Transcript including all schedules and W2’s (Parents and Student) AND
   - Completed 2019-2020 Dependent or Independent Household Web Form.

_______ Loss of untaxed income or benefits - Student spouse, or parent(s) has lost untaxed earnings (such as child support, Worker’s Compensation, etc.). Since the last year reported on your most recent FAFSA.

1. Who has lost earnings? Name: ___________________________ Relation to student: ___________________________

2. Dates of reduced earnings: From: ___________________________ To: ___________________________

4. Acceptable Documentation:
   - Evidence of loss of untaxed income or benefits (court decisions, letter of denial) AND
   - SIGNED copy of 2017 Federal IRS Tax Return Transcript AND 20118 Federal IRS Tax Return Transcript including all schedules and W2’s (Parents and Student) AND
   - Completed 2019-2020 Dependent or Independent Household Web Form.

_______ Occurrence of One-time Income – Student, spouse or parent(s) received a one-time lump sum (such as inheritance, retirement, IRA distribution, etc.) that was reported on the 2019-2020 FAFSA but is not expected in the future.

1. Who received one time income? Name: ___________________________ Relation to student: ___________________________

2. Acceptable Documentation:
   - Official evidence of one-time income (legal forms, financial statements, etc.) AND
   - Signed statement that identifies the source of income and how the funds were spent or invested. AND
   - Documentation supporting how the funds were spent or invested. AND
   - SIGNED copy of 2017 Federal IRS Tax Return Transcript AND 2018 Federal IRS Tax Return Transcript including all schedules and W2’s (Parents and Student) AND
   - Completed 2019-2020 Dependent or Independent Household Web Form

_______ Separation or divorce – Student or your parents, if dependent) have separated or become divorces since the time the FAFSA was filed.

1. Date of divorce or separation: ___________________________ Relation to Student: ___________________________
2. Name of Primary (Custodial) Parent (after separation or divorce): ____________________________

3. Name of family members remaining in household: ____________________________ Number in College: ____________________________

4. Acceptable Documentation:
   • Legal documentation of separation or divorce (such as court decision or divorce decree) AND
   • SIGNED copy of 2017 Federal IRS Tax Return Transcript AND 2018 Federal IRS Tax Return Transcript including all schedules and W2's (Parents and Student) AND
   • Completed 2019-2020 Dependent or Independent Household Web Form.

_______ Death – Your spouse (or parent, if dependent) received income for the most recently reported tax year, but passed away after you completed the FAFSA.

1. Date of death: ____________________________

2. Name of deceased: ____________________________ Relation to Student: ____________________________

3. Number of family members remaining in household: ____________________________ Number in College: ____________________________

4. Acceptable Documentation:
   • Legal documentation of death (such as a copy of death certificate) AND
   • SIGNED copy of 2017 Federal IRS Tax Return Transcript AND 2018 Federal IRS Tax Return Transcript including all schedules and W2's (Parents and Student) AND

_______ Filing status – You disagree with the definition of a Dependent Student, as outlined by the U.S. Department of Education as it applies to you.

1. Acceptable Documentation
   • Signed personal statement describing why you feel that you are independent from your parents and including your housing arrangements while in school in session and during breaks AND
   • Signed personal statements from individuals not related to you (such as clergy, governmental agency), stating their personal knowledge of you being independent AND
   • SIGNED copy of 2017 Federal IRS Tax Return Transcript AND 2018 Federal IRS Tax Return Transcript including all schedules and W2's (Parents and Student) AND
   • Completed 2019-2020 Dependent or Independent Household Web Form.

   • SIGNED copy of 2017 Federal IRS Tax Return Transcript AND 2018 Federal IRS Tax Return Transcript including all schedules and W2's (Parents and Student) AND

_______ Medical or dental expenses – You or your parents paid medical or dental expenses not covered by insurance that exceeds 10% of your income during 2017.

1. Acceptable Documentation:
   • SIGNED copy of 2017 Federal IRS Tax Return Transcript AND 2018 Federal IRS Tax Return Transcript including all schedules and W2's (Parents and Student) AND
   • Completed 2019-2020 Dependent or Independent Household Web Form AND
   • Documentation showing proof of payment (such as copies of cancelled checks), used to pay out of pocket medical or dental expenses. AND/OR
   • Continuation of amount paid out-of-pocket by you during 2017 and purpose of expenses (amounts billed will not be considered without proof of payment).

_______ Other – Circumstance not otherwise listed: Effective Date: ____________________________

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Section 3: Certification Statement

I/We certify that the information on the form is true, complete, and correct to the best of my/our knowledge. I/We understand that false statements or misrepresentation are cause for denial, reduction, withdraws, and/or repayment of financial aid. I/We also understand that the information will be used in accordance with Federal Guidelines and may or may not result in adjustments to the student’s financial aid eligibility.

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<tr>
<th>Student’s Signature</th>
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<td>Spouse’s Signature (if applicable)</td>
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Return this form, with all required documentation to: Morehouse College – Office of Financial Aid
830 Westview Drive, S.W.
Atlanta, GA 30314

Phone: 844-512-6672
Fax: 470-639-0974