SPECIAL CIRCUMSTANCES FORM
2010-2011 Academic Year

At some point in the financial aid process, you have indicated circumstances that you would like for us to review as we process your financial aid. Follow the steps below and return this form with the appropriate documentation to the address at the end of this form. The information you provide on this form will be reviewed to determine if adjustments to your FAFSA can be made. You will be notified of the decision by the Office of Student Financial Planning. All decisions made by the Office of Student Financial Planning concerning special circumstances are final. If you have questions, please contact the Office of Student Financial Planning at (731) 661-5015.

- File the 2010-2011 FAFSA at [www.fafsa.gov](http://www.fafsa.gov)
- Complete this Special Circumstances form and attach documentation required in Section B.
- Attach a detailed letter documenting your circumstances.
- Attach a signed copy of your and your parent’s (if dependent) 2009 tax returns.
- Complete and attach the 2010-2011 Verification form found at [http://www.uu.edu/financialaid/](http://www.uu.edu/financialaid/)
- Submit this form with attachments to the Office of Student Financial Planning of Union University.

Section A – Student Information

NAME ____________________________ UNION ID OR SSN ____________________________

ADDRESS ____________________________ CITY, STATE, ZIP ____________________________ PHONE ____________________________

PARENT(S) WHOSE INFORMATION WAS PROVIDED ON YOUR FAFSA:

MOTHER’S (STEPMOTHER’S) NAME ____________________________ DAYTIME PHONE ____________________________

FATHER’S (STEPFATHER’S) NAME ____________________________ DAYTIME PHONE ____________________________

Section B – Special Circumstances – Check all that apply

From the list provided, indicate the reason for the requested review of your family’s financial situation.

- [ ] Loss of a Job, or Parental Loss of Job
  - Separation Notice/ Termination Notice or documentation from employer showing effective date of termination.
  - Documentation of severance package (if one exists).
  - Statement of Unemployment Benefits and effective dates.

- [ ] Loss of Untaxed Income
  - Loss of Social Security Benefits
    - Provide notification of termination of benefits.
  - Loss of Child Support
    - Provide court documentation stating the date of termination of benefits.
  - Loss of Worker’s Compensation
    - Provide appropriate official documentation stating date of termination of benefits.
  - Other. Please specify and provide appropriate documentation.

- [ ] Loss of Taxable Income
  - Loss of Alimony
    - Provide court documentation stating the date of termination of benefits.
  - Loss of Unemployment Benefits
    - Provide appropriate letter from the unemployment office stating date of termination of benefits.
  - Other. Please specify and provide appropriate documentation.
Excessive Medical Expenses

Payments made out of pocket beyond what your insurance covers. Do not include insurance premium costs.

- Provide bills showing the expenses.
- Provide proof of personal payment of the expenses in question (check stubs, receipts, etc)

Lump sum (one-time) income

This could include, but is not limited to inheritance, moving expense allowance, lump sum retirement payments, etc.

- Provide appropriate documentation identifying the income in question and how the funds were spent or invested.

Other Circumstances.

Please list________________________________________________________________________
__________________________________________________________________________________

Section C - Income Assessment Form – Please complete the table(s) below to help us assess your actual income for 2010. Report all income you expect to receive through December 31, 2010 in the appropriate boxes. You must include documentation supporting all income. This documentation could include but is not limited to:

- Recent pay stubs showing year-to-date earnings (since January 1, 2010) OR
- A letter from your employer stating total 2010 projected and or actual earnings
- W-2 Forms

If you are submitting the request for consideration after December 31, 2010, you must submit a copy of your completed 2010 federal income tax return.

**STUDENT INCOME AND ASSET INFORMATION**

<table>
<thead>
<tr>
<th>Income For 2010 (January 1 To December 31)</th>
<th>Actual 1-1-10 To Today</th>
<th>Estimated Today To 12-31-10</th>
<th>Total = Actual + Estimated</th>
</tr>
</thead>
<tbody>
<tr>
<td>STUDENT: expected income earned from work (wages, salaries, tips, net farm or business)</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>SPOUSE: expected income earned from work (wages, salaries, tips, net farm or business)</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other Taxable income: (dividends, interest, pensions, annuities, alimony, unemployment compensation, capital gains) SOURCE:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Social Security benefits</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Child support received</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other untaxed income: (earned income credits, welfare benefits, workers comp., payments to IRA/Keogh, etc) SOURCE:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Total student and/or spouse income for 2010</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

Please list the net worth of the student’s current assets (Net Worth means market value of the asset minus debt on the asset).

- Current amount of cash, savings, and checking: $_______________
- Current net worth of investments/real estate (other than home): $_______________
- Current net worth of farm or business: $_______________

Dependent students who were required to enter parental information on the FAFSA must complete the remainder of this form. Independent students please skip the Parent Income and Asset Information and complete the Certification and Signature.
### PARENT INCOME AND ASSET INFORMATION

<table>
<thead>
<tr>
<th>Income For 2010 (January 1 To December 31)</th>
<th>Actual 1-1-10 To Today</th>
<th>Estimated Today To 12-31-10</th>
<th>Total = Actual + Estimated</th>
</tr>
</thead>
<tbody>
<tr>
<td>MOTHER: expected income earned from work (wages, salaries, tips, net farm or business)</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>FATHER: expected income earned from work (wages, salaries, tips, net farm or business)</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other Taxable income: (dividends, interest, pensions, annuities, alimony, unemployment compensation, capital gains) SOURCE:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Social Security Benefits</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Child Support Received</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other untaxed income: (earned income credits, welfare benefits, workers comp., payments to IRA/Keogh, etc) SOURCE:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Total parental income for 2010</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

Please list the net worth of the parents’ current assets (Net Worth means market value of the asset minus debt on the asset).

- Current amount of cash, savings, and checking: $_________
- Current net worth of investments/real estate (other than home): $_________
- Current net worth of farm or business: $_________

### Part 3 - Certification and Signature

My signature below certifies that the information I have provided on this form is true. I agree to provide proof of the information if and/or when requested. I understand that the penalty for providing false or misleading information is a $10,000 fine, a prison sentence, or both.

Student Signature_________________________ Date________________

Parent Signature_________________________ Date________________

Spouse of Student Signature_________________________ Date________________

### FOR OFFICE USE ONLY

Student Not Eligible _______ Request Approved _______ Request Denied _______

Comments__________________________________________________________

FA Administrator_________________________________ Date___________

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