2026-2027 REQUEST FOR RECONSIDERATION BASED ON EXTENUATING CIRCUMSTANCES

	Income earned in 2024 does not accurately reflect the student's and/or spouse's or parents' income in 2025 or for one of the following reasons. Check all that apply and provide documentation as required on the back of form.					
	Independent Student					
	A. loss of employment or change of employment status for student/spouse					
	B. divorce/separation or death of a spouse					
	C. loss of untaxed income D. additional funding needed to stay in school					
	E. unusual medical/dental bills or disability-related expenses					
	F. one-time income					
	G. other unusual debt/expense (transportation related, child care, residency interviews, etc.)					
	Dependent Student					
	H. parents' loss of employment or change in employment status					
	I. student's loss of employment of change in employment status					
	J. loss of untaxed income (Social Security benefits, pension, etc.)					
	K. divorce/separation or death of a parent L. additional funding needed to stay in school					
	M. unusual medical/dental bills or disability-related expenses					
	N. one-time income					
	O. other unusual debt/expenses (transportation related, child care, residency interviews, etc.)					
	Please complete the following chart for 2025 or 2026 if 1-A, 1-B, 1-C, 1-D, 1-H, 1-I, 1-J, 1-K, or 1-L is check					
	INCOME*	Student/Spouse	Parent			
	Wages, salaries, tips (include severance pay, disability payments, etc.)					
(Other taxable income					
Į	Intaxed social security benefits					
1	Aid to Families with Dependent Children					
	Child Support Received					
(
	Other Untaxed Income					
(Other Untaxed Income TOTAL INCOME					
Ti p			•			

EXPLANATION: Please excircumstances or attach a lette		ances merit consideration	n for extenuating	
circumstances or attach a fette	r of explanation.			
Loss of employment or chang	e in employment status:			
To use income for 2025, ple				
A. 2025 Federal Ta	ax Return (i.e. 1040, 1040	lez, or 1040A etc.)		
To estimate your projected i	ncome for 2025 or 2026	nlease provide at least o	ne of the following:	
	ch indicate the amount yo			
	loyer detailing termination			
C. unemployment	papers and copy of last pa	nyroll check stub(s) refle	cting year-to-date wag	e total
Divorce, separation or death	of a snouse or narent. D	eovide all W 2 form(s) as	nd one of the following	
A. copy of divorce		ovide all w-2 form(s) al	nd one of the following	·-
B. death certificate				
2.	0			
Loss of untaxed income: Prov				_
A. letter from the a	gency who provided bene	efits detailing terminatio	n and summary of bene	efits
Unusual medical/dental bills	or handicapped related (expenses:		
Provide a copy of Schedule	A of the Federal 1040 for	m or canceled checks or	receipts showing amo	unt paid;
include medical insurance p				
of the I.P.A.)				
One time income:				
Document source and amou	nt of income and verify u	se of income. Discretion	nary expenses will be re	eviewed
according to Federal Regula	•		inity only only or in our	
Other unusual debt/expenses:		C /F	•	
Document the debt/expens exceed 9% of the I.P.A.)	e and include method	of payment. (For unu	isual transportation ex	rpenses, must
exceed 9% of the I.P.A.)				
CERTIFICATION:				
All of the information on this	s form and on the supp	orting documents is tr	ue and complete to tl	ne best of my
knowledge.				
		A 1	D. Santa I	
		Approved	_ Rejected	
Student's Signature	Date			
<u> </u>		Director or Ass	istant Director	
		21100101 01 1155	22 21100001	
Parent's Signature (for Dependen	t Students only)	Date		
			icator on last tab of	
		RNANAxx)		