Shawnee State UNIVERSITY

2025-2026 Special Condition Application

Student Name : _____ Student ID: _____

Federal Regulation for Financial Aid allows a Financial Aid Administrator limited authority to adjust the Free Application for Federal Student Aid (FAFSA) data elements when certain circumstances exist. A Special Condition is not the costs associated with lifestyle choices, consumer indebtedness (house payments, car expenses, living without roommates, credit card debt, etc.). Please note, bankruptcy cannot be used in the review of eligibility for financial aid. If you feel that your circumstances have changed significantly since you originally filed your 2025-2026 FAFSA, please review this form and follow the instructions.

Your FAFSA and all verification documents must be submitted prior to filing a Special Condition Application.

Step 1: In the first column of the table below, check the appropriate circumstance, attach a signed statement explaining the details, and provide all necessary supporting documentation.

Special Condition	For an Independent Student	For a Dependent Student	Required Documentation – All requests need a signed statement explaining situation.
☐ **Loss of Employment**	Your (and/or your spouse's) earned income in 2025 will be significantly less than it was reported on the FAFSA.	Your parent(s) or your earned income in 2025 will be significantly less than it was reported on the FAFSA.	*Last pay stub(s) *Termination/resignation letter *Unemployment summary *Copy of severance package *Documentation of year-to-date income *2024 1040 and all schedules
☐ **Loss of Income** • Social Security • Child Support • Alimony	Your (and/or your spouse's) benefits in 2025 will be less than those reported on the FAFSA.	Your parent(s) or your benefits in 2025 will be less than those reported on the FAFSA.	*For Social Security: Documentation of total amount of 2025 benefits and date of termination or reduction with effective date and new monthly amounts if applicable *For child support or alimony: Documentation of 2025 updated figures.
☐ **Marital separation or divorce AFTER 2025-2026 FAFSA has been filed**	You and your spouse have divorced or separated AFTER filing the FAFSA.	Your parents have divorced or separated AFTER filing the FAFSA.	*Divorce decree or separation agreement that includes anticipated child support and/or alimony *Proof of separate addresses for both parties (e.g. utility bill, lease agreement, etc.). *2024 1040, all schedules, and W2s.
☐ **Death of a parent or spouse**	Your spouse has passed away.	A parent whose information is on the FAFSA has passed away.	*Copy of Death Certificate *2024 1040, all schedules, and W2s.
☐ **Medical or dental expenses** To make adjustments in this area, you must document where you have paid out-of-pocket expenses in excess of the EFC formula allowance.	Your (and/or your spouse's) unreimbursed medical/dental expenses in 2024 exceeded 11% of your income protection allowance.	Parent(s) or student unreimbursed medical/dental expense in 2024 exceeded 11% of your income protection allowance.	*Documentation of PAYMENT(s) made in 2024 (not covered by insurance) medical/dental bills *Schedule A (if filed) of the IRS 1040
□ **Change of Parent Information on FAFSA**	n/a	Written explanation why the student is changing the parental information.	*Copy of parents' 2023 federal tax return and W2 forms *FAFSA Step 4 *Verification Worksheet *Signed certification page

Step 2: Enter all untaxed income and benefits received for January 1, 2025, to December 31, 2025. Do Not Leave Blank

Untaxed Income and Benefits for 2025	Parent 1	Parent 2	Student	Spouse
Retirement/Pensions Benefits	$	$	$	$
Child Support Received	$	$	$	$
Disability/Workers Compensation – exclude SSDI	$	$	$	$
Veterans Non-Education Benefits	$	$	$	$
Payments to Retirement Accounts	$	$	$	$
Other: ex. COLA	$	$	$	$

Step 3: Enter all taxable income received for January 1, 2025, to December 31, 2025. Do Not Leave Blank

Taxed Income and Benefits for 2025	Parent 1	Parent 2	Student	Spouse
Wages, Salaries, Tips (received 2025 year to date)	$	$	$	$
Wages, Salaries, Tips (estimate for remaining 2025)	$	$	$	$
Total Wages, Salaries, and Tips for 2025	$	$	$	$
Interest and Dividends (re. Native Corporation dividends)	$	$	$	$
Unemployment Benefits	$	$	$	$
Pension/IRA Distribution	$	$	$	$
Business/Farm Income	$	$	$	$
Rental Income or Loss	$	$	$	$
Other:	$	$	$	$

Certification

I certify that the above information and any additional information provided are true and correct to the best of my knowledge. I understand that this information will be used to determine my eligibility for federal and institutional student aid, and as such, carries the same penalties for misrepresentation and fraud as my Free Application for Federal Student Aid (FAFSA).

Student Signature: _____ **Date:** _____

Spouse Signature (if married): _____ **Date:** _____

Parent Signature: _____ **Date:** _____

Please upload all documents through the Financial Aid Student Portal accessible in your MySSU account. You may also mail your information to Shawnee State University, Financial Aid Office, 940 Second Street, Portsmouth Ohio, 45662 or fax to 877-940-2505. Please do not email any documents.