

2024-2025 **Special Circumstance Request**

Independent Student

The MGCCC Financial Aid Office recognizes that some students may experience special circumstances that cause a substantial reduction in their income which may impact their ability to contribute to college costs. Students may use this form to report changes that have occurred since filing their 2022 tax returns. The submission of this form means that MGCCC will evaluate your circumstances, but it does not guarantee an increase in your financial aid award. You may complete this form only one time per academic year. Changes to your financial aid award will be communicated through your MGCCC e-mail account and Web Services.

Complete this form **ONLY** if your family's income is **SUBSTANTIALLY LOWER** in 2023 than it was in 2022.

Student's Name _____ GCID (M#) _____

Step One – Identify and Document Special Circumstance

Instructions:

Please check the box(es) that best applies to your situation and attach the requested documentation. In order for your request to be considered, you must support your claim with the required documentation.

Death of Spouse

- o Submit a detailed letter outlining your situation and its impact on your household's 2023 income.
- Submit a copy of the death certificate or equivalent.
- Submit a copy of your and your spouse's 2023 Federal Tax Return Transcripts (if submitting request after December 2023).

Marital Separation, Pending Divorce, or Divorce

- For your request to be considered, the student and (former) spouse must live in separate residences.
- Submit a detailed letter outlining your situation and its impact on your household's 2023 income.
- o Submit documentation of separation (attorney's letter, counselor's letter, or documentation of separate residences) or divorce decree.
- Attach documentation to support all income listed (2023 W2s, last pay stub, unemployment compensation, etc.).
- Submit a copy of your and your spouse's 2023 Federal Tax Return Transcripts (if submitting request after December 2023).

Separation from Work Due to Layoff or Termination

- For your request to be considered, the length of unemployment must be substantial.
- o Submit a detailed letter outlining your situation and its impact on your household's 2023 income.
- Submit documentation of layoff or termination from former employer or the unemployment office. Letter from former employers must be on company letterhead and should list the date of layoff or termination.
- Attach documentation to support all income listed (last pay stub, unemployment compensation, severance pay, etc.).
- Submit a copy of your and your spouse's 2023 Federal Tax Return Transcripts (if submitting request after December 2023).
- Change in Job Status (Reduction of Work Hours, Retirement, Permanent Disability, etc.)
 - Submit a detailed letter outlining your situation and its impact on your household's 2023 income.

2024-2025 Income Reduction Request Independent Student

Page 2

- Submit documentation of job change status from your employer. The letter from your employer must be on company letterhead and should list the date your reduction of hours occurred.
- Attach documentation to support all income listed (last pay stub, unemployment compensation, severance pay, etc.).
- Submit a copy of your and your spouse's 2023 Federal Tax Return Transcripts (if submitting request after December 2023).

D Reduction or Loss of Benefits or Non-Recurring Income

- For your request to be considered, these benefits must have been received for 2022 but have been reduced or lost for 2023.
- Submit a detailed letter outlining your situation and its impact on your household's 2023 income. The letter should outline the reduction or termination of benefits and indicate the date the reduction or termination occurred. If the benefit was one-time or non-recurring, please include verification of how the funds were spent or invested.
- Submit documentation of loss of benefits.
- Submit a copy of your and your spouse's 2023 Federal Tax Return Transcripts (if submitting request after December 2023).

Step 2 - Verification

If you have not done so, submit a copy of the 2024-2025 Independent Verification Worksheet and a copy of your and your spouse's 2022 Tax Return Transcripts. (attached)

Step 3 – Estimate 2023 Income

Instructions:

Please fill out the chart below. Enter the estimated income for yourself and your spouse from the sources listed below. If an income item does not apply to you, enter "n/a" in the appropriate space. If the change in income is not documented, it will not be taken into consideration for your Income Reduction Request.

| Type of Income | Student's 2023 Amount | Spouse's 2023 Amount |
|------------------------------------|-----------------------|----------------------|
| Money Earned from Work | \$ | \$ |
| Retirement Benefits | \$ | \$ |
| Disability Benefits | \$ | \$ |
| Unemployment Benefits | \$ | \$ |
| Social Security Benefits | \$ | \$ |
| Alimony | \$ | \$ |
| Child Support Received | \$ | \$ |
| Business/Farm/Rental Income | \$ | \$ |
| Other Untaxed Income (Please list) | \$ | \$ |

Mississippi Gulf Coast Community College is an Equal Opportunity Employer and welcomes students and employees without regard to race, religion, color, national origin, sex, age or qualified disability in its programs and activities. For further information, contact the **Compliance Officer**, P.O. Box 609, Perkinston, Mississippi 39573, telephone number 601-528-8735, email address <u>compliance@mgccc.edu</u>.

I certify that all of the information on this request and included documentation is true and complete to the best of my knowledge. I understand that if I purposely give false or misleading information as part of this request that I may be subject to a \$20,000 fine, a prison sentence, or both.

| Student Signature | | Date | |
|---------------------|------|------|--|
| For Office Use Only | | | |
| | DENY | | |
| Comments: | | | |
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| | | | |
| | | | |
| Directors Signature | | Date | |

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2024-2025 Income Reduction Request Independent Student Page 4



2024-2025 Verification Worksheet Federal Student Aid Programs

Independent Student

Your application was selected for review in a process called "verification." In this process, MGCCC will be comparing information from your application with the information on this worksheet and other required documents. The law requires that the College ask you for this information before awarding Federal Student Aid. If there are differences between your application information and your financial documents, corrections may need to be submitted to the Department of Education. Please answer carefully and completely.

Complete this verification form and submit it to your financial aid administrator as soon as possible so that your financial aid will not be delayed. Your financial aid administrator will help you if you have questions.

What you should do

- 1. Complete and sign the worksheet.
- 2. Submit the completed worksheet, tax forms, and any other documents your school requests to your financial aid administrator.

| 3. Section A: | Student Information | | |
|------------------|------------------------|---------------|----------------------------------|
| Last Name | First Name | Middle/Maiden | GCID (M#) |
| Address (include | e Apt # if applicable) | | Date of Birth: mm/dd/yy () |
| City | State | Zip Code | Phone Number (Include Area Code) |
| | | | |

Section B: Family Information

List the people in *your household* including:

- Yourself, and your spouse if you are married, and
- Your children, if you provided more than half of their support from July 1, 2024 through June 30, 2025 (even if they do not live with you) and
- Other people if they now live with you, you provide more than half of their support and provided more than half of their support from July 1, 2024 through June 30, 2025.

Write the names of all household members in the space(s) below. For those household members that will be attending college at least half-time between July 1, 2024 and June 30, 2025, and will be enrolled in a degree, diploma or certificate program. If you need more space, attach a separate page.

| Full Name | Age | Relationship | College |
|-----------|-----|--------------|---|
| | | Self | Mississippi Gulf Coast Community College |
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Section C: Student's (and Spouse's if married) Tax and Income Information

- 1. Check only ONE box below:
 - Check here if you have made a correction to your FAFSA at www.fafsa.gov.
 - □ Check here if you are attaching a copy of your and your spouse's 2022 IRS tax transcript. Tax transcripts must be requested directly from the IRS by visiting www.irs.gov and clicking on "Get a tax transcript" or by calling 1.800.908.9946.
 - Check here if you and your spouse will not file and are not required to file a 2022 U.S. Income Tax Return and are attaching a copy of each of your 2022 W-2 forms (if received). YOU MUST PROVIDE DOCUMENTATION FROM THE IRS THAT INDICATES A 2022 IRS INCOME TAX RETURN WAS NOT FILED. Please see the Verification of Non-Filing Letter at mgccc.edu Financial Aid Forms page. Please answer question 2.
- 2. If you and your spouse did not file and are not required to file a 2022 Federal Income Tax Return, list below your employer(s), any other sources of income (such as SSI; Social Security Disability; Child Support Received; TANF; Veterans Non-Education Benefits; Family/Friends; Military or Clergy Housing/Food/Living; etc.), and income amounts received in 2022 (use W-2 forms if available):

Student's Income:

| Employer's Name/Source of Income | 2022 Amount Earned/Received | 2022 W-2 Attached? |
|----------------------------------|-----------------------------|--------------------|
| | \$ | 🛛 Yes or 🗌 No |
| | \$ | □ Yes or □ No |
| | \$ | □ Yes or □ No |
| | \$ | □ Yes or □ No |

Spouse's Income (if married):

| Employer's Name/Source of Income | 2022 Amount Earned/Received | 2022 W-2 Attached? |
|----------------------------------|-----------------------------|--------------------|
| | \$ | 🛛 Yes or 🗆 No |
| | \$ | □ Yes or □ No |
| | \$ | 🛛 Yes or 🗌 No |
| | \$ | 🛛 Yes or 🗌 No |

WARNING:

IF YOU PURPOSELY GIVE FALSE OR MISLEADING INFORMATION ON THIS WORKSHEET, YOU MAY BE FINED, PROSECUTED FOR FRAUD, SENTENCED TO JAIL, AND/OR FACE OTHER CHARGES, AND WILL HAVE TO REPAY ANY FINANCIAL AID FUNDS YOU RECEIVED.

Student Signature

Spouse Signature (if applicable)

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Date

Date