

Financial Aid Office

2121 Euclid Avenue, Cleveland, OH 44115 Phone 216-687-5411 Fax 216-687-9247

www.csuohio.edu/financial-aid

2024-2025 Special Circumstance Petition

	Last Name	First Name	CSU ID #	
This p	cetition should only be completed by	ircumstances and supporting doc by an independent student/spouse or	s Specialist in Campus 411 All-in-1 to review umentation.*** parent(s) of a dependent student. Students need 5 petitions will be considered after May 1st, 2	d to have
The fol	lowing documents must be subn	nitted with this form before your j until you have all required do	petition will be reviewed. Do not submit your ocuments.	r petitio
Check	□ Detailed explanation of y □ The appropriate 2024-20 □ 2022 signed copy of your Transcript(s) for Studen of All 2022 W-2s issued to required if the IRS Direct □ All additional required of Additional informat If this petition is filed	r 1040 (Include Schedules 1, 2, at and Spouse (if married) or Sto Student, Spouse (if married) or Data Exchange (DDX) was undecided to the state of	ww.csuohio.edu/financial-aid/financial-aid- 3, C, and K-1 if applicable), or IRS Tax it tudent and Parent(s) (if dependent), and , and Parent(s) (if dependent). This <u>is Name is a successfully on the 2024-2025 FAFS</u> circumstance. The second of the secon	Return a copy <u>OT</u>
(N Addi: 1) Do 2) Ex	May include pension or IRA distritional required documentation: ocumentation of one-time paymentation of why one-time paymentation o	ent nent is not available for education		ion
	oss of Untaxed/Taxable income: A	limony, Workers Compensation, Un	nemployment, or other.	
Date Addi Rec	Benefit OR Untaxable/Taxable sound of Benefit or Income Loss:tional required documentation: ord of amount received from 1/1 mination letter from provider/ag	Amou	nt received for 2022 \$	
Addi 1) Se	paration/Divorce: tional required documentation: eparation or divorce documenta ll 2022 W-2s for both parties	tion		
Name Relati Addit 1) C	onship to student: tional required documentation: opy of the death certificate	d a Joint 2022 signed copy of 1040		

Student's Name		2024-2025	CSU ID Number	
☐ Medical /Dental Expenses: Out of Additional required documentation 1) Copy of Schedule A from 2022	n:	2 exceeded 10% of the adjust	ed gross income.	
Date of Loss:	-2Student Spous		pouse or parent of dependent student).	
Additional required documentation Update income to 2023: 1) All 2023 W-2(s) issued 2) 2023 signed copy of your 1040		2, 3, C, or K-1 if applicable), or IRS Tax Return Transcript	
Update income to 2024: If this petition 1) A letter on letterhead from pr 2) Last paystub showing year to 3) Unemployment Benefits Determined	on is filed after December 31, 2 evious employer indica date earnings or letter	2024 you MUST submit your 2024 F nting last day worked from employer indicating y	ederal Tax Return and W2s.	
☐ Other: Attach a brief statement and	supporting documentati	on.		
Service of the actual income for the imp *Note: This form must be signed with a han *Student's Signature		d names or electronic signatures Date	are not acceptable and will delay processing	
*Parent's Signature (If Depende	ent Student)	Date		
	For Of	ffice Use Only		
Old EFC:		New Parent-1 income:		
New EFC:		New Parent-2 income:		
New AGI:		New additional Information:		
New Taxes Paid:		New untaxed income:		
New student income:		Current ISIR Trans #:		
New spouse income:		New ISIR Trans #:		
☐ APPROVED Notes:	□ DENIED	□ WAIVED	□ NOT NEEDED	
FAO Staff:				