Financial Aid • One Hop Shop • SUNY Canton • 34 Cornell Drive • Canton, NY 13617 Tel: (315) 386-7616 • Toll-Free: (800) 388-7123 • Fax: (315) 386-7930 • email: finaid@canton.edu

Student Name:	ID:	

## 2022 – 2023 SPECIAL CONSIDERATION REQUEST (Parents Only)

INSTRUCTIONS: The Financial Aid Office realizes that families sometimes experience unforeseen circumstances and/or expenses during an academic year. This form is designed to help you address changes to your family income and expenses. This review will only impact federal aid and will not New York State awards.

Read and complete all appropriate sections of this form to request special circumstance consideration. You must submit all required documentation as listed on this form. **Requests will not be processed without all required documentation**.

### **Section A: Reason for Special Circumstance**

Submit a signed written statement describing your situation. The statement should be as specific as possible, the more details you provide us with the better we will be able to understand your current financial situation. Be sure to including the reason your income situation changed since 2020 and specific dates these changes occurred.

Check the box in the chart below for the special circumstance that applies to your family situation. Gather together all of the required documentation listed for your situation type for submission with this completed worksheet for processing.

SPECIAL CIRCUMSTANCE REASON			REQUIRED DOCUMENTATION		
	Reduction or Loss of Employment	1.	Final 2022 Paystub(s) with Year to Date Earnings for Parent.		
	Your parent(s) income earned in 2022 will	2.	Unemployment Benefit Summary for Parent.		
	be less than earned in 2020.	3.	2020 Parent W-2 Income Statement(s).		
		4.	2020 Parent IRS Tax Transcript.		
		5.	2021 Parent IRS Tax Transcript.		
		6.	2021 Parent W-2 Income Statement(s).		
	Reduction or Loss of Untaxed Income	1.	Documentation of 2022 updated figures.		
	Your parent(s) 2020 benefits were reduced	2.			
	or ceased in 2022. These may include	3.	2020 Parent W-2 Income Statement(s).		
	Child Support, Social Security, Worker's Compensation, etc. 4. 2020		2020 Parent IRS Tax Transcript.		
			2021 Parent IRS Tax Transcript.		
		6.			
	Change in Marital Status	1.	7 1 0 \ 77 0		
	Marriage, Separation, Divorce, or	2.	Proof of separate residence for both parties (i.e. electric bill, lease, etc.)		
	widowed	3.	2020 Parent W-2 Income Statement(s).		
	Enter Date of Change:	4.	2020 Parent IRS Tax Transcript.		
	Enter Date of Change.	5.	2021 Parent IRS Tax Transcript.		
_		6.	2021 Parent W-2 Income Statement(s).		
	Medical/Dental Expenses	1.	1 1 1 7 5		
	Out-of-pocket expenses paid in 2020 due	_	amounts you paid in 2020.		
	to uninsured medical expenses that	2.	1 1 1		
	exceeded 11% of your AGI.		2020 calendar year?		
			Parent Name: Total Paid: \$		
		2	Parent Name: Total Paid: \$		
		3.	2020 Parent IRS Tax Transcript.		
	One Time Payment Received	1.	Documents detailing source, amount, and reason for the one-time payment		
	Parent received a one-time payment (lump		in 2020.		
	sum) in 2020 that is not re-occurring.	2.	2. What is the amount of the one-time payment received in the 2020 calendar		
	,		year?		
			Parent Name: Amount: \$		
			Parent Name: Amount: \$		
		3.	2020 Parent IRS Tax Transcript.		
	sum) in 2020 that is not re-occurring.		* *		

## **Section B: Estimate of 2022 Parent Income**

Anticipated 2022 Parental Income Information (January 1, 2022 to December 31, 2022):

Complete each item in the chart below for the calendar year 2022. You will need to estimate where actual income figures are not available or have not yet been earned. **Do not leave any blank spaces; enter zero or N/A if necessary**.

ESTIMATED 2022 PARENT INCOME	PARENT 1 Name:	PARENT 2 Name:
Taxable Income:		
Wages, salaries, tips (actual)  January 1, 2022 to Today:	\$	\$
Wages, salaries, tips (estimate) Today to December 31, 2022:	\$	\$
Unemployment Benefits:	\$	\$
Severance Pay:	\$	\$
Business/Farm Income (Loss):	\$	\$
IRA Distributions:	\$	\$
Total Pension(s) or Annuities:	\$	\$
Other taxable income (Alimony, Capital Gains, etc.): List Source:	\$	\$
Non-Taxed Income:		
Veterans Non-Education Benefits:	\$	\$
Disability / Worker's Compensation:	\$	\$
Child Support Received in 2022:	\$	\$
Child Support Paid Out in 2022:	\$	\$
Untaxed Portions of Pensions / Annuities (Exclude Rollovers):	\$	\$
Untaxed Portions of IRA Distributions (Exclude Rollovers):	\$	\$
Living Allowances for Military, Clergy, and Others:	\$	\$
Other Non-Taxable Income: List Source:	\$	\$

# **Section C: Student Income Verification**

Use this chart to determine what documentation is required to be submitted for your student.

INCOME INFORMATION – STUDENT				
Did the student work in 2020?	Did the student file a tax return in 2020?	Required documentation:		
No	☐ No, student did not work.	None.		
Yes	☐ No, student worked but did not file a tax return.	Submit copies of all student 2020 federal W-2 income statement(s).		
	☐ Yes, student filed a tax return.	Submit confirmation using the IRS Data Retrieval Tool on FAFSA.gov, <b>OR</b>		
		Submit confirmation by requesting an IRS "Tax Return Transcript" by phone, online, or mail.		

### **Section D: Confirmation of Family Size**

In the chart below write in the name, age, and relationship of all the people in the household, be sure to include:

- Yourself:
- Your legal parent(s) that would provide more than half of your support, even if you choose not to live with your parent(s). A legal parent is a biological, adoptive, and/or step-parent;
- Your parents' other children, even if they do not live with your parent(s), if
   (a) your parents will provide more than half of their support from July 1, 2022 through June 30, 2023, or
   (b) the children would be required to provide parental information when applying for federal aid;
- Other people if they now live with your parents and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2022 through June 30, 2023.

Be sure to indicate if each household member listed below will be attending a college at least half time between July 1, 2022 and June 30, 2023 enrolled in a degree, diploma, or certificate program.

FULL NAME	AGE	RELATIONSHIP	NAME OF COLLEGE OR CHECK NONE
(example) Heather Smith	18	Self	☐ None ☐ College Name: SUNY Canton
			☐ None ☐ College Name:
			☐ None ☐ College Name:
			☐ None ☐ College Name:
			☐ None ☐ College Name:
			☐ None ☐ College Name:
			☐ None ☐ College Name:
			☐ None ☐ College Name:
			☐ None ☐ College Name:
			☐ None ☐ College Name:

## **Section E: Certification Statement**

I certify that the information provide One Hop Shop at SUNY Canton of a information provided with this reque of financial aid eligibility for the stu-	any error, omission, or a est. I understand that fa	any further circumstances that may	affect the accuracy of the
Student Signature	Date	Parent Signature	Date

# Return this form with all required documentation to:

SUNY Canton, One Hop Shop, 34 Cornell Drive, Canton, NY 13617.