



Lindsey Wilson University
Financial Aid Office
210 Lindsey Wilson Street
Columbia, KY 42728

2025-26 Student Special Circumstances

According to Federal laws and regulations, the 2023 income tax returns are used to assess financial need for the 2025-2026 school year on the FAFSA. If the 2024 income is lower or there are other financial burdens that have impacted your ability to pay, a financial aid administrator may be able to use the 2024 or anticipated 2025 income to assess financial need. Please provide information regarding your reduction in income or unusual incurred expenses by completing this form and providing supporting documentation.

Student's **Legal** Name _____ LWU ID _____

Student's **Preferred** Name _____

Address _____ City _____

State _____ Zip _____

Parent's Name(s) _____ Parent Email _____

Complete the following actions:

1. Indicate the reason(s) that the FAFSA does not accurately reflect your current financial situation.
2. Provide a statement of your special circumstance in the provided space or type it on a separate sheet.
3. Upload supporting documentation and this form to the LWU secure portal. (Do not email documentation with PII (Personal Identifying Information) <https://portal.lindsey.edu/forms/financialAid/secureUpload/>)

Your special circumstance request will not be considered unless you provide adequate and appropriate documentation. **Also, your special circumstance will not be considered unless you provide a signed copy of the official tax returns or IRS Tax Transcripts, and W2's for both the student and the parent (if a dependent student) for 2023 and 2024. If a student is selected for verification, it must be completed before a professional judgement to review special circumstances can be processed. The decision to approve or deny this request will be made within 60 days of the date this form is submitted and all decisions are final.**

FOR OFFICE USE ONLY

____ Special Circumstances Denied

____ Special circumstances approved

Old EFC _____

New EFC _____

Comments: _____

Administrator's Signature

Date

1. Check the reason(s) that the FAFSA does not accurately reflect your current financial situation.

☐ Unemployment: Choose reasons listed below.

- ____ Layoff
- Provide a letter from employer stating effective date and anticipated return.
- ____ Plant Closing
- Provide a letter from employer stating effective date.
- ____ Termination
- Provide a letter from employer stating effective date. If this is not available provide documentation from the local unemployment office.
- ____ Disability
- Effective date (mm/dd/yy) _____. Attach documentation of the disability.
- ____ Resigned or reduced workload to attend school
- Provide a letter from employer stating effective date.
- ____ Retirement
- Provide documentation to support date of retirement
- ____ Other. Please specify and provide appropriate documentation.
- _____
- _____

☐ Loss of income: Choose reasons listed below.

- ____ Alimony
- Provide court document(s) stating termination date of benefit.
- ____ Social Security
- Provide Social Security Administration notification of termination of benefit.
- ____ Child Support.
- Provide a letter or court document stating termination date of benefits.
- ____ Worker's Compensation.
- Provide a letter from Bureau of Worker's Compensation stating termination date of benefit.
- ____ Divorce
- Date of divorce _____
 - Attach a copy of the divorce decree
- ____ Separation
- Date of separation _____
 - Current address of spouse _____
- ____ Death of parent reported on the FAFSA
- Provide death certificate
- ____ One-time income in 2023 affecting income

- Explain: _____
- Provide documentation to show how funds were spent or invested.

____ Other.

- Please specify and provide appropriate documentation.

☐ **Other unusual expenses**

____ Medical or dental expenses

- Provide documentation for expenses paid that were not covered by insurance.

____ Natural Disaster or Incident

- Explain circumstances and what bills you incurred due to the disaster or incident.
- Provide documentation for expenses paid.

2. Statement of special circumstances: Please summarize your special circumstances below. Attach an additional sheet if necessary.

CERTIFICATION: I certify that the information provided above is true and complete to the best of my knowledge.

Student Signature _____ Date _____

Parent's Signature _____ Date _____