

2024-2025 Special Circumstance Application

Loss of Taxable Social Security

When completing the FAFSA, you are required to provide 2022 income/asset information and in some cases, this information changes or is not a good representation of your family's financial situation. If you are experiencing a hardship or other situation that is not reflected on the FAFSA, we may be able to reevaluate your financial need.

<u>INSTRUCTIONS:</u> Please complete all sections of this worksheet and submit any requested information to the Financial Aid Office. You will be notified by mail once a decision has been made. Decisions of the Special Circumstances Review Committee are final. **All Steps, A-E, are required.** Please contact us with any questions at 614-251-4778 or finaid@ohiodominican.edu.

Α.	. Student Information	
Student's Full Name Student Phone Number (Including Area Code)		ODU Student ID Number or Last 4 of social
		Parent Daytime Phone Number (Dependent Students only)
В.	. Reason For Filing – Loss of Taxable Social Security Bene	efits
	1. Date funds were reduced or ceased:	
	2. Indicate the amount and frequency (weekly, monthly) social security WAS being received prior to the change: \$	
	 Indicate the amount and frequency (weekly, monthly) social Required Documentation: Letter from Social Secumentities is to occur AND a statement showing how in reduction. 	urity Administration indicating the date the change in
C.	. Personal Statement	
	I have attached a personal statement to this application explaining the details of my specific situation.	
D.	. Verification Worksheet	
	I have submitted a V1 Standard: 2024-2025 Verification Worksheet and any documentation that may be required with it (located at www.ohiodominican.edu/finaidforms).	
Ε.	Certification and Signatures	
the	y signing this application, I certify that the information provided on the best of my knowledge. I understand that incomplete requests will a quested to verify my circumstance(s). I also understand that submittingustment to my/my child's financial aid.	not be processed and additional documents may be
Stu	udent's Signature:	Date:
Parent's Signature (Dependent Students Only):		Date: