# MISSOURI SET

#### **Student Financial Assistance**

G-1 Parker Hall, 300 W. 13th Street Rolla, MO 65409

P: 573/341-4282 F: 573/341-4274

## 2024-2025 Financial Aid Year Independent Special Circumstance Review

Last Name (Student)	First Name	M.I.
Daytime Phone Number (include	area code)	Missouri S&T Student ID#
be scanned and uploaded, faxed,	mailed, or brought to the Studen	tion. These forms and documentation can t Financial Assistance Office. Please send nentation, as these documents will not be
year because of one or more of the less than or equal to \$0, an adjust is less than or equal to zero, an an aneed-based aid and a Special Circulation.	he following conditions, and you ment of your 2024-2025 FAFSA in djustment to your FAFSA informa cumstance review will not be con the request via the student's S&	or different than in the 2022 calendar r Student Aid Index (SAI) is not already aformation may be possible. (If your SAI ation will not change your eligibility for apleted). If additional documentation is &T email. (Please check that you have
completed verification, you do not	ed before we can begin your Special need to complete it again. when contacted by Inceptia (3 <sup>rd</sup> pa	Circumstance review. If you have already rty contractor) in the next 3-4 weeks.
Letter(s) of termination Copy of final pay stub( Unemployment award	n (including date of termination) fr s) showing year-to-date income pric	or to termination
Letter(s) from employe or wage information)	er(s) documenting date employmer	nt ends (if due to disability or retirement) ome due to job change (must include salary ne
the student's portion.  Copy of legal document of separation, divorce	student's and spouse's 2022 tax retu	rn transcripts should be divided to reflect eptable documentation includes legal notice death of a spouse) or child support

Loss or Reduction of Social Security (taxed), Child Sup  ☐ Original 2022 benefit statement listing total and and an and an arrangement and and an arrangement and and an arrangement and arrangement and arrangement and arrangement arrangement and arrangement	mount received or court documents listing updated amount to receive and			
Elementary or Secondary School Tuition  Documentation of private elementary, junior high and/or high school tuition paid, or to be paid in the 2024-2025 academic year. Please download, complete, and attach the Elementary and Secondary Tuition Verification Form from <a href="mailto:sfa.mst.edu/resources/forms/">sfa.mst.edu/resources/forms/</a>				
Medical Expenses - Family  Note: The FAFSA already protects a portion of a family's income for medical expenses and therefore, the total amount of paid medical expenses must exceed 11% of the amount on the "Income Protection Allowance" chart for an adjustment to be made.  Documentation of expenses paid between Jan. 1, 2024, and Dec. 31, 2025 (e.g. hospital and doctor's statements, receipts, paid bills, and/or insurance benefit statements) for the family. If formal payment plan(s) have been made, submit copy of signed agreement.  Independent Students without Dependent(s) Other than a Spouse  Unmarried: \$17,310  Married: \$27,750				
Independent Students with Dependent(s) Oth  Table C2: Income Protection	Allowance – Married with Dependents			
Family Size (including Student)	Income Protection Allowance Amount			
3	\$54,580			
4	\$67,400			
5	\$79,530			
6	\$93,010			
Note: For each additional household member, add	\$10,510.			
Table C3: Income Protection Allowance – Single with Dependents				
Family Size (including Student)	Income Protection Allowance Amount			
2	\$51,960			
3	\$64,700			
4	\$79,880			
5	\$94,260			
6	\$110,230			
Note: For each additional household member, add	\$12,460.			

### **Other Circumstances**

If you have circumstances, you believe may qualify for a change in FAFSA information but are not listed above, please submit a written explanation and documentation of your circumstance along with this completed form. The above-mentioned criteria are only the most common reasons for Special Circumstances Review.

### Expected 2024 taxable and non-taxable income & benefits

2024 U.S. Income <u>earned from work</u>	Student:	\$	
${\rm [January1^{st}\text{-}December31^{st}}$	Spouse:	\$	
Estimated 2024 totals:		\$	
2024 other taxed and untaxed:		Student	Chausa
Complete the following as it applies to y			Spouse
Social Security benefits \$x	months =	\$	\$
ADC OR AFDC		\$	
Child support		\$	\$
Unemployment Benefits		\$	\$
Other untaxed benefits (specify	)	\$	
Welfare benefits		\$	\$
Disability benefits		\$	
Other taxable income (include interest,	dividends, busi	iness	
income, alimony, pension, capital gains	, annuity, etc.)	\$	
Total estimated 2024 other taxed & unt	axed income:	\$	
<b>Certification:</b> I/we certify that all inform documents are attached to this form to s			d complete. Statements and
Student's signature:			Date:
Spouse's signature:(If married, spouse's signature is optional.			Date:
Daytime phone:			
Cellphone:		Email:	
Address:			

Return form to Student Financial Assistance In-person/mail: G-1 Parker Hall 300 West 13th Street Rolla, MO 65409-0250

Fax: 573.341.4274

Submit in <a href="Joe">Joe"/SS:</a> Secure Document Upload (QR Code provided)

