



DEPENDENT SPECIAL CONDITIONS

Academic Year 2017-2018

The Department of Education recognizes that special conditions may exist for families who have suffered major reductions in income for various reasons during 2016 or 2017. For those families, the 2015 tax return does not accurately reflect the current financial status. If your family’s income has been significantly reduced, you should complete this form and return it to the Financial Aid Office for further consideration of your 2017-2018 eligibility for aid.

Student’s Information

_____	_____	_____	_____
Last Name	First Name	M.I.	Student’s ID Number
_____			_____
Street Address (include apt. no.)			Date of Birth
_____	_____	_____	_____
City	State	Zip Code	Email Address
_____			_____
Home Phone Number (include area code)			Alternate or Cell Phone Number

Please read carefully all instructions to complete this form. You must provide COPIES of all documentation requested. Incomplete request submittals will NOT be evaluated.

A. DEPENDENT SPECIAL CONDITION(S)

- Father has retired, been unemployed for at least two full months, or will experience a change in employment status which will result in an income reduction. **Attach verification**, i.e.: Statement from employer indicating last date worked and last pay stub, or DD214. Effective date of new employment status:_____ Mth/Day/Yr.
- Mother has retired, been unemployed for at least two full months, or will experience a change in employment status which will result in an income reduction. **Attach verification**, i.e.: Statement from employer indicating last date worked and last pay stub, or DD214. Effective date of new employment status:_____ Mth/Day/Yr.
- Untaxed income has ceased or been reduced. **Attach verification**. Date of change:_____ Mth/Day/Yr.
- Permanent and total disability of father or mother. **Attach verification**. Date of disability:_____ Mth/Day/Yr.
- Death of parent, which occurred AFTER January 1, 2015. **Attach** a copy of death certificate. Date of Death: _____ Mth/Day/Yr.
- One-time lump sum payment received (i.e.: severance, inheritance, lottery, etc.)

B. Written Statement

Provide a written explanation detailing all reasons your family’s income has been reduced. Attach additional pages as necessary.

C. Projected 2017 Income Worksheet

Complete the Projected 2017 Income Worksheet. Provide a separate statement and documentation (copies of pay stubs, etc.) explaining how you arrived at these projections.

Projected 2017 Income Worksheet				
	Father’s Income (gross wages)	Mother’s Income (gross wages)	Unemployment Benefits	Untaxed Income
January	\$	\$	\$	\$
February	\$	\$	\$	\$
March	\$	\$	\$	\$
April	\$	\$	\$	\$
May	\$	\$	\$	\$
June	\$	\$	\$	\$
July	\$	\$	\$	\$
August	\$	\$	\$	\$
September	\$	\$	\$	\$
October	\$	\$	\$	\$
November	\$	\$	\$	\$
December	\$	\$	\$	\$
Totals:	\$	\$	\$	\$

D. 2017 Gross Taxed and Gross Untaxed Income

Using totals from your Projected 2017 Income Worksheet, complete gross taxed and gross untaxed income sections below with income your family expects to receive from January 1, 2017 until December 31, 2017 (prior to exemptions adjustments, or deductions). **If zero, enter zeros. Attach a statement explaining how your family’s living expenses are provided.**

Student ID: _____

2017 Gross Taxed Income	Father's Income	Mother's Income
Wages, salaries and/or tips for 2017	\$	\$
Severance pay for year 2017	\$	\$
Pensions and Annuities for year 2017	\$	\$
Interest and dividend income for year 2017	\$	\$
Business or Farm income for year 2017	\$	\$
Capital gains for year 2017	\$	\$
Income received from rents after expenses paid for mortgage interest, taxes, and insurance for 2017	\$	\$
Alimony which will be received for year 2017	\$	\$
Unemployment compensation for year 2017	\$	\$
Any other taxed income for year 2017	\$	\$
Total 2017 gross taxed income:	\$	\$

2017 Gross Untaxed Income	Father's Income	Mother's Income
Payments to Tax-deferred Pension & Savings Plans (paid directly or withheld from earnings). Include untaxed portion of 401k and 403 b plans for 2017	\$	\$
Social Security benefits (SSI or disability) received by student, children or spouse, if married, for 2017	\$	\$
Retirement or Disability Benefits for 2017	\$	\$
Worker's Compensation for 2017	\$	\$
Welfare benefits including TANF (excluding Food Stamps) for 2017	\$	\$
Untaxed portion of pensions for 2017	\$	\$
Living & Housing allowances (excluding rent subsidies for low income housing) for clergy, military and others (include CASH payments and cash value of benefits) for 2017. Don't include the value of on-base military housing or the value of basic military housing allowance.	\$	\$
Child Support or Maintenance payments which will be received for ALL children for the year 2017	\$	\$
Cash support or money given on student's behalf for 2017	\$	\$
Veteran's Benefits, except Student's Educational Benefits, for the year 2017	\$	\$
Railroad Retirement Benefits for the year 2017	\$	\$
Any other Untaxed Income and Benefits such as Black Lung Benefits, Refugee Assistance, etc., for year 2017	\$	\$
Total 2017 gross untaxed income:	\$	\$

E. Tax Returns and W2's

You must attach signed copies of student and parent 2015 Federal Tax Return(s) and 2015 W2s.

F. Certification and Signatures

Incomplete Special Conditions Requests will be returned or denied. Please review the form and initial each item indicating you have provided all requested documentation.

- _____ 1) Step A, check your reason for submitting the application and attach verification as requested.
- _____ 2) Step B, write a detailed explanation why the application is being submitted.
- _____ 3) Step C, complete the Projected 2017 Income Worksheet leaving NO blanks and provide documentation.
- _____ 4) Step D, complete both gross taxed and gross untaxed income tables.
- _____ 5) Step E, attach signed copies of student and parent 2015 tax return and all 2015 W2s.

By signing this form I certify that all the information reported is true. I understand that purposely submitting false or misleading information is a federal offense punishable by fines, jail sentence or both.

Student's Signature

Date

Parent's Signature

Date

Submit completed form to:
Office of Financial Assistance
Northwestern Oklahoma State University—Herod Hall 113
709 Oklahoma Blvd
Alva, OK 73717
Phone (580) 327-8542 Fax (580) 327 8177