

Colorado Mountain College

Office of Student Financial Aid

Special Circumstances Form Independent Students 2012-2013

OFFICE USE ONLY			
,	Approved:	Denied	
Commen	ts:		
Date:		FAO:	

If you have unusual circumstances, complete this form and submit it to our office with specified documentation. Examples of unusual circumstances are:

- Unusual medical or dental expenses not covered by insurance*.
- Income reduction or non-recurring income.

*Unusual Medical/Dental Expenses

Medical/dental expenses up to 11% of one family's income are already taken into account by the Federal Needs Analysis Formula when determining financial aid eligibility. Therefore, only the portion of expenses which exceed 11% will be considered unusual circumstances.

Student's Name	Telephone No.	SSN or Student ID		
	•			
Student's Address				
Student's Address				
		@mail.coloradomtn.edu		
CMC Issued Email Address				
Student: Complete the section that pertains to your family's situation. Return this complete form				
to our office with specified documentati		attern recent time complete form		
to our office with specified documentati	OII.			
Unusual Medical/Dental Expenses				
How much did you or your spouse pay for medical/dental expenses not covered by				
insurance in 2011? \$. ,	,		
ποσιατίος πι 2011. <u>ψ</u>				

- If you or your spouse itemized medical/dental expenses, a signed copy of the 2011 Federal Income Tax Return with Schedule A.
- If your spouse did not itemize medical/dental expenses, provide receipts of medical and dental payments made in 2011.

DOCUMENTATION:

	INCOME REDUCTION OR NON-RECUR	RING INCOME	
1.	Will you or your spouse's income be significantly less in 2	2012 than in 2011? YesNo	
2.	If you answered "yes" to number 1, check the appropriate reason below and explain, giving		
	the date of the change in your situation.		
	a. Divorce or separation		
	b. Death of a spouse		
	c. Disability of student or spouse		
	d. One-time income (e.g., inheritance, moving expens security payment, IRA, etc.)	e allowance, back-year social	
	Date of the occurrence:		
3.	If 2(d) is checked, identify the source of income, the amo invested:	unt, and how the funds were spent o	
4.	If 2(a), 2(b), 2(c), or 2(d) is checked, provide the following	information for 2012.	
	 Wages, salaries, tips, (including severance pay, dis 		
	payments and any income from work.	Ψ	
	Other taxable income	\$	
	 Untaxed social security benefits 	\$	
	 Aid to Families with Dependent Children (AFDC) 	\$	
	Child support to be received	\$	
	Other untaxed income	* \$	
	 TOTAL anticipated income for 2012 	\$	
DOC	UMENTATION:	·	
For e	stimated income: signed statements documenting estimate	ted earnings, and alimony or child	
supp	ort designated in divorce agreements. For non-recurring in	ncome: 2011 signed federal income	
tax re	eturn showing itemized deductions; moving expenses, cap	ital gains/losses, etc.	
	gning this worksheet, I (we) certify that all the information lete and correct. If your spouse's information is provided,		
	/ARNING: If you purposely give false or misleading in ou may be fined, be sentenced to jail or both.	formation on this worksheet,	
	You will be contacted via CMC email if any further	information is required	
Stude	ent Signature	Date	

Spouse Signature

Date