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OFFICE of
 STUDENT
 FINANCIAL AID

Office of Student Financial Aid
 Carrington Hall, Room 101
 901 S. National Ave.
 Springfield, MO 65897

www.MissouriState.edu/FinancialAid

2023-2024 Application for Special Circumstance Consideration – Independent Student

Student's Name (Last) _____ (First) _____ M BearPass # _____ Student's Date of Birth _____

Deadline for submitting: please complete and submit ALL required documentation to the fax/email/address above by:
 Fall Semester: December 1, 2023 • Spring Semester: April 1, 2024

Complete sections A & B and attach all documentation required.

This form does not guarantee a change in financial aid, nor will it extend payment due dates. You are responsible for your account balance.

Before completing this form, please visit our [Special Circumstance Guidelines](#) page.

A. Circumstances (Check all that apply)	Documentation Required
<input type="checkbox"/> You or your spouse's 2022 Adjusted Gross Income (AGI) is significantly less than your 2021 AGI	1. Signed copy of 2022 federal tax return, including Schedules 1-3, Schedule C, Schedule K-1 (Form 1065), if used 2. All 2022 W-2s 3. Typed and signed explanation of why AGI is lower in 2022
<input type="checkbox"/> Loss or change in employment (continuous for 8+ weeks) • Wage earner's name: _____ • Date employment ceased: _____ Will wage earner return to work in 2023? <input type="checkbox"/> Yes <input type="checkbox"/> No	1. Letter from employer concerning loss/change in job status 2. Signed copy of 2022 federal tax return, including Schedules 1-3, Schedule C, Schedule K-1 (Form 1065), if used 3. All 2022 W-2s 4. Statement of Unemployment Benefits for 2022 5. If reemployed, provide two most recent paystubs with year-to-date totals 6. Typed and signed statement explaining loss/change in job status If this form is completed after Nov. 1st your signed 2023 federal tax return, schedules, and W-2s will be required.
<input type="checkbox"/> Someone in your household received public assistance in 2021, 2022, or 2023, or is currently a dislocated worker	Complete and return the <i>Public Assistance or Dislocated Worker</i> worksheet instead. Do not submit this worksheet.
<input type="checkbox"/> Divorced or legally separated after FAFSA was filed	1. Court document or notarized statement indicating the date of divorce or legal separation 2. Signed copy of 2021 federal tax return for student and spouse, including Schedules 1-3, Schedule C, Schedule K-1 (Form 1065), if used 3. Signed 2021 state tax return for student and spouse 4. All 2021 W-s for student and spouse 5. Independent Verification Worksheet 6. Asset Information Worksheet
<input type="checkbox"/> Spouse on FAFSA is deceased Will you receive survivor benefits? <input type="checkbox"/> No <input type="checkbox"/> Yes	1. Copy of death certificate 2. Signed copy of 2021 federal tax return for student and spouse, including Schedules 1-3, Schedule C, Schedule K-1 (Form 1065), if used 3. Signed 2021 state tax return for student and spouse 4. All 2021 W-s for student and spouse 5. Survivor benefits statement (if applicable)

<input type="checkbox"/> Expenses paid in 2022 for private or parochial school(s) for household members reported on FAFSA, and not reimbursed by scholarships, grants, employers, etc.	<ol style="list-style-type: none"> 1. Private Tuition Payment Verification Form 2. Signed copy of 2022 federal tax return, including Schedules 1-3, Schedule C, Schedule K-1 (Form 1065), if used 3. All 2022 W-s
<input type="checkbox"/> Medical or dental expenses paid in 2022 that were not reimbursed by insurance/third party	<ol style="list-style-type: none"> 1. Signed copy of 2022 federal tax return, including Schedules 1-3, Schedule A, Schedule C, Schedule K-1 (Form 1065), if used 2. All 2022 W-2s 3. Copies of receipts paid out-of-pocket in 2022 4. Summary of amounts <i>paid</i> by you or your spouse in 2022 (not paid by insurance or an outstanding balance)
<input type="checkbox"/> Child support payments reported on the FAFSA have ended or been reduced in 2023	<ol style="list-style-type: none"> 1. Court or Child Service Agency documentation stating benefit ending date and amount received in 2023 for each child

If you wish to grant permission for the Office of Student Financial Aid to discuss your special circumstance and financial aid information with your parent or legal guardian, please complete the [FERPA Release of Information Authorization](#).

B. Certification Statement & Signatures

By signing below, I acknowledge that I have attached all supporting documentation and that all information submitted is accurate and true to the best of my knowledge. Information provided may be discussed with the student, parents, or spouse as necessary. I have read the [Special Circumstance Guidelines](#) and understand that submitting this form does not guarantee my request will be granted.

Student's Signature: _____

Date: _____

Spouse's Name (printed): _____

Spouse's Signature: _____

Date: _____