Clark College Financial Aid Office

## 2024-25 Special Circumstance Form

Financial Aid Office 1933 Fort Vancouver Way | Vancouver, WA 98663-3598 (360) 992-2153 | FAX (360) 992-2864 | finaidmail@clark.edu

(000) 001 2 100   1 / 5 / (000) 002 200 /   mining significant				
Student Information:				
ctcLink ID Number	Date of Birth			
Last Name	First Name	Middle Initial		
You may submit this form to request a re-evaluation of your f of income or other financial changes. <b>Please note:</b> We will	0 , ,			

documentation with the submission of this form.

Step 1: Please check off the following that apply to you. Refer to the "Acceptable Documentation" column to reference required supporting documentation.					
Kinds of Special Circumstances		Acceptable Documentation			
	Loss of income due to change in Employment	<ul> <li>Signed copy of your most recent 1040 Federal Tax Return or Tax Transcript</li> <li>OR</li> <li>Copy of your most recent W - 2 or other income statements</li> </ul>			
	Unemployment Benefits	<ul> <li>A signed copy of tax return or transcript</li> <li>A copy of your Unemployment Statement for the same tax year</li> <li>If you are currently receiving Unemployment Benefits and are providing your most recent income statements, please provide:</li> <li>Statement documenting the benefit start/end date and the weekly amount</li> <li>Documents showing final pay</li> </ul>			
	Unexpected or unusual medical and/or dental expenses	A statement from each medical, dental, or insurance provider documenting the amount you, your spouse, or your parent(s) paid <b>after</b> insurance.			
	Change in Marital Status	Documentation for change in marital status may include: Separation or divorce decree, death certificate, proof of separate mailing address, updated lease agreements.  To separate out income please provide:  A signed copy of your most recent 1040 Federal Tax Return or Tax Transcript, and  Copies of your most recent W-2 or other income state- ments			

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Stud	ent	Int	orm	ation:

ctcLink ID Number

Step 2: Personal Statement: Please write a detailed statement including what the change is and when the change happened.

Step 3: Obtain and provide additional supporting documentation as indicated in Step 1 in the "Acceptable Documentation" column . Include your supporting documentation with the submission of this form to the Financial Aid Office.

## **Step 4:** Certification and Signature.

STUDENT AND/OR PARENT CERTIFICATION AND SIGNATURE: By submitting this form, I certify that all of the information reported on it is true and correct. I understand that if I purposely give false or misleading information on this form, I may be fined, sentenced to jail, or both.

Student's Signature	Da	te
-		<del>`</del>

(If Applicable) Parent Signature

Date



The college affirms a commitment to freedom from discrimination for all members of the college community. The responsibility for, and the protection of, this commitment extends to students, faculty, administration, staff, contractors, and those who develop or participate in college programs. It encompasses every aspect of employment and every student and community activity. The college expressly prohibits discrimination on the basis of race, color, national origin, age, perceived or actual physical or mental disability, pregnancy, genetic information, sex, sexual orientation, gender identity, marital status, creed, religion, honorably discharged veteran or military status, citizenship, immigration status, or use of a trained guide dog or service animal. Harassment is a form of discrimination.

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