

## 2024-2025 PARENT SPECIAL CIRCUMSTANCES FORM

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**STUDENT NAME**

**UMass Global ID NUMBER**

You may request reconsideration of your financial aid award if your family’s financial circumstances have changed significantly or you have special circumstances that were not reported on your initial financial aid application. Changes resulting from this review do not guarantee an increase in aid.

**What is the change in circumstance? (check all that apply)**

	Termination or other employment change		Child care or Elder care expenses
	Retirement or Disability		Dislocated Worker
	Loss of untaxed income		Severe Disability expenses
	Recent divorce or separation		Other (explain in personal statement)
	Medical/dental bills not covered by insurance		

**Supporting documentation included (check all that apply)**

	Employment severance letter		Medical/dental bills showing unreimbursed amount
	Most recent paystub showing changed salary		Disability benefits statement
	Final paystub from previous employer		Child care expense receipts
	Unemployment benefits statement		Other documentation to support your statement
	2023 Federal Income Tax Return		

**Do you (or someone in your household) receive any of the following assistance?** If yes, please provide documentation of benefits

	Medicaid or Supplemental Security Income (SSI)		Temporary Assistance for Needy Families (TANF)
	Supplemental Nutrition Assistance Program (SNAP)		Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
	Free or Reduced Price School Lunch		Medicaid

**Personal Statement:**

Attach a personal statement explaining your circumstances. Please provide as much detail as possible to help us better understand your changed financial situation.

**Substantial changes in 2023 and/or 2024 income:**

If your review request is based on a substantial **change to your parent(s) income in 2023:**

- Include a copy of your parent(s) 2023 federal tax return along with your documentation.

If your review request is based on a substantial **change to your parent(s) income in 2024:**

- Itemize below all sources of income, both taxed and untaxed, that you expect to receive in 2024. Use pre-tax income figures and include a number for each item; if the amount is zero, put \$0.

**Anticipated 2024 income source:**

**2024 pre-tax amount:**

Parent 1 wages, salaries, tips (Parent name: _____ )	\$ _____
Parent 2 wages, salaries, tips (Parent name: _____ )	\$ _____
Interest income or dividends	\$ _____
Alimony received	\$ _____
Net income from business or farm	\$ _____
Net rental income (or loss)	\$ _____
Pensions, annuities, royalties, partnerships, estates, trusts, etc.	\$ _____
IRA distributions	\$ _____
Capital gains (or losses)	\$ _____
Unemployment compensation, severance pay, etc.	\$ _____
Other taxable income (specify sources below):	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____
	\$ _____
<b>TOTAL:</b>	\$ _____

I CERTIFY THE SUBMITTED INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I HAVE READ EACH SECTION AND HAVE PROVIDED THE REQUIRED DOCUMENTATION. I UNDERSTAND THAT UNDERESTIMATING PROJECTED INCOME COULD RESULT IN REDUCED ELIGIBILITY AND/OR REPAYMENT OF AID AND/OR DENIAL OF FUTURE REVIEWS/APPEALS.

\_\_\_\_\_  
STUDENT'S SIGNATURE (wet signature)

\_\_\_\_\_  
DATE

\_\_\_\_\_  
PARENT'S SIGNATURE (wet signature)

\_\_\_\_\_  
DATE

**Submit completed form with supporting documents through the student portal. OR:**  
Mail: UMass Global Financial Aid Office, 65 Enterprise, Suite 150, Aliso Viejo CA 92656-2707