2026-27 Special Circumstance Request

STUDENT INFORMATION

Student Name_____ AU Student ID_____

*Best Person to Contact_____ Relationship_____ Phone Number_____

*Note: For currently enrolled students, this person must be on your FERPA authorization form and know the FERPA code.

This form cannot be completed in pencil. Please submit with ALL applicable documentation.

A Special Circumstance Request is intended for students, spouses, and/or parents who have experienced significant life changes, which include, but are not limited to, the situations noted on this form.

The purpose of this request is to assess an ability to administratively change your FAFSA data due to your unique circumstances and the documents submitted. There is no guarantee an approval will result in increased aid eligibility.

- Thorough documentation is required to explain and verify your situation. Incomplete documentation will cause delays. Additional documents may be requested after initial review.
- After verifying all submitted documents, multiple corrections may be administratively made to your FAFSA before a new offer letter can be generated. The Department of Education will notify you by email of any corrections made.
- This request is in effect for the 2026-2027 academic year only. Policies and procedures are subject to change as influenced by regulatory changes.

A Special Circumstance review begins after the Office of Financial Aid receives all required documents. Once your request has been fully evaluated and any permissible FAFSA changes have been made, your financial aid eligibility is reassessed. You will be notified of the Special Circumstance Request outcome. A new offer letter will be issued if the request is approved and the student is eligible for additional financial aid.

SECTION A: REQUIRED ITEMS

Print the student name and student ID number on all submitted documentation to assure proper identification.

- ☐ 1. Completed Special Circumstance Request form
- ☐ 2. A statement explaining your appeal condition
- ☐ 3. Completed 2026-27 Family Size Verification form (Form B1 on aurora.edu/forms2026)
- ☐ 4. Copy of 2024 IRS Tax Return Transcript for all tax filers (student/spouse/parent) listed on the FAFSA

  Request a free Tax Return Transcript from the IRS:
  - Visit IRS.gov and click on "Get Your Tax Record" and then "Get Transcript by Mail" to have transcript(s) mailed to you
  - Call 800-908-9946
  - Submit IRS Form 4506-T or 4506T-EZ to the IRS
- ☐ 5. Copy of **all 2024 W-2s** for all people (student/spouse/parent) listed on the FAFSA
- ☐ 6. Any additional items listed in **Section B** based on your appeal condition

To return this form: Secure Document Uploader: **aurora.edu/submitfinaidforms**
Fax: 630-844-6191 | Mail: Office of Financial Aid, 347 S Gladstone Ave, Aurora, IL 60506 | In Person: Eckhart Hall, Room 324
Questions: Email: finaid@aurora.edu | Phone: 630-844-6190
Note: Documents submitted via email cannot be accepted due to security reasons.

SECTION B: APPEAL CONDITIONS (Check applicable box and provide requested information for situation.)

❒ **Loss of Job or Reduction in Hours/Salary**

Name of Person Experiencing Loss of Job or Reduction in Hours/Salary _____

January 2025-December 2025 (if more than three employers in 2025, attach additional sheet)

Name of Employer	Months Worked in 2025 (ex: Jan-Mar)	Income Earned in 2025
		$
		$
		$

January 2026-December 2026 (if more than three employers in 2026, attach additional sheet)

Name of Employer	Months Worked in 2026 (ex: Jan-Mar)	Projected Income Earned in 2026
		$
		$
		$

****Additional information will be requested after initial review.**

❒ **Loss of Benefits (taxed Social Security, child support, etc.)**

- ♦ Documentation showing amount of benefit and date that it was/will be terminated

❒ **Separation/Divorce of Student or Parents**

Date of Separation/Divorce_____ Projected Yearly Child Support Amount $_____

- ♦ Provide legal documentation of the separation/divorce such as official court documents.
  - If unable, provide proof of separate addresses (i.e. separate utility bills, separate mortgage/lease).
- ♦ Documentation showing the amount of child support, if applicable.

❒ **Death/Disability of Parent/Spouse**

- ♦ Provide official documentation of the death/disability.

❒ **Major Medical Expenses Paid***

* Only medical expenses reflected on **Schedule A** of the submitted **2024 IRS Tax Return Transcript** can be considered.

❒ **Tuition Paid for Sibling at Private Elementary, Middle, and High Schools**

- ♦ Provide a copy of 2026-2027 tuition bill(s) on school letterhead reflecting the attending student's name.

❒ **Other**

If you feel you have an unusual circumstance not covered in any of the above conditions, explain the circumstances in a written statement in detail. Submit any applicable documentation to support your explanation.

SECTION C: CERTIFICATION

I certify that the information I have provided regarding my request is true, complete, and accurate to the best of my knowledge. **I understand this information can be used to override federal regulations and submit corrections to my FAFSA.** By signing this application I agree, if asked, to provide information that will verify the accuracy of my request. I understand that if I purposely give false or misleading information in connection with my application for federal student aid, I may be fined, sent to prison, or both.

_____ _____

Student Signature →**Must be drawn and not typed.** Date

_____ _____

Parent Signature (If Dependent) →**Must be drawn and not typed.** Date