

_ast Name: _	
UO ID: _	

2025-2026 Academic Year Special Circumstance Request for Independent Student – Projected Income

Student Name:	UO	ID:
Our office understands there may	y be circumstances in which the informatio	n provided on the FAFSA does not alw

Our office understands there may be circumstances in which the information provided on the FAFSA does not always accurately reflect your current financial situation. Please complete this form if you would like our office to review your special circumstance for consideration of additional financial aid eligibility. Keep in mind that changes in aid eligibility generally only pertain to the federal student aid programs (for undergraduate students this may include the Pell Grant and Subsidized Direct Loan), not institutional or state aid programs. Not all changes result in additional aid eligibility.

We may consider: Loss of employment or other income, separation or divorce, death of a spouse, unusually high outof-pocket medical and/or dental expenses, one-time source of income, other special circumstances We generally do not consider: Location, domicile or household debt (e.g. personal loans and credit card debt)

- 1. Use the table below to estimate income from July 1, 2025 through June 30, 2026 for yourself, and spouse if applicable, and <u>provide documentation</u> to substantiate estimates, such as: most recent (or final) pay stubs, pension statements, unemployment statements, and other relevant documents to support the figures provided.
- 2. Attach a statement to this form that addresses why your 2023 income reported on the FAFSA is not an accurate representation of your financial situation. What has changed? Please explain how the projections were calculated including pertinent information, such as: dates of employment/unemployment and frequency of payments.

Estimated Income (7/1/2025 – 06/30/2026) – do not leave any box blank, if none please put 0						
Taxable Income:	Student	Spouse	Untaxed Income:	Student	Spouse	
Gross wages (not net), including severance	\$	\$	Untaxed portion of pensions or IRA distributions (exclude rollovers)	\$	\$	
Business income/Loss	\$	\$	Payments to tax-deferred pension and retirement plan, such as 401k	\$	\$	
Unemployment	\$	\$				
Alimony	\$	\$	Veterans noneducation benefits	\$	\$	
Rental property income	\$	\$	Public assistance	\$	\$	
Interest/Dividends	\$	\$	Worker's compensation	\$	\$	
Capital gains	\$	\$	Disability benefits	\$	\$	
Taxable Social Security benefits	\$	\$	Tax exempt interest income	\$	\$	
Taxable pension or IRA distribution	\$	\$	Other untaxed income, Source:	\$	\$	
			Additional Financial Info:			
Other taxable income, Source:	\$	\$	Taxable earnings from Federal Work-Study	\$	\$	

By signing this worksheet, you certif knowledge. Federal tax forms may be	•	d is complete and correct to the best of your
Typed or auto-generated electronic	Warning: If you purposely give false or misleading	
Student Signature	Date	information, you may be fined, sent to prison, or both.
Spouse Signature	Date	-

Office of Student Financial Aid and Scholarships

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