

REQUEST FOR SPECIAL CIRCUMSTANCES 2026-2027

STUDENT'S NAME:		STUDENT'S ID:			
Address:		City:			
STATE:	Zip:	Email:			
PHONE	Number: ()				
Mark only those that apply, and attach the required documentation. Complete the income section on the back of this sheet, sign and date, and return it to our office. If you wish to explain in further detail, you may attach an additional sheet.					
	Laid Off - Date: Plant closing - Da Disability-date of Resigned or reduc Other Loss of Other Income: Alimony Child Support Worker's Compen Other	From/ to/			
divorced. Give financial information for yourself, and, if dependent, the parent who provided the most support for you. Date divorce was final:/					
Separation: Since applying for financial aid, you or your parents (if you're a dependent student) have officially separated from spouse. Date of separation:/ Give financial information for yourself and/or the parent who provided the most support for you.					
	_ Unusual Expenses Paid:	avnances noid out of posket for the 2022 calendary con			
	Medical or dental expenses paid out of pocket for the 2023 calendar year Elementary or secondary education paid in 2023 for dependents. Please provide a letter from				
	the institution stating payment date and amount.				
		ense not covered by insurance or Medicare			
	Unusual high depe	endent care expense.			

	ease use	my 2025 income, as it was less than my 2024	income. I have provided the	following:			
		Data Direct Exchange on the 26-27 FAFSA for from the IRS for both parent and student, if st		2024 tax transcript			
		Attach a 2025 Tax Return Transcript from the	IRS for parent and student,	if student worked			
☐ Ple	ease use	e my 2026 income, as I suffered a loss of income from work. I have provided the following:					
		Data Direct Exchange on the 26-27 FAFSA for the 2024 taxes <i>or</i> attach a 2024 tax transcript from the IRS for both parent and student, if student worked, or signed 2024 tax returns					
		Most recent pay stub(s) for all employed mem	nbers of the household				
☐ Unemployment statement showing unemployment received and remaining balance							
	Other						
□ Ple	ease per	form special circumstances due to a separation	or divorce. I have provided	the following:			
		Data Direct Exchange on the 26-27 FAFSA for the 2024 taxes <i>or</i> attach a 2024 tax transcript from the IRS for both parent and student, if student worked, or a signed 2024 tax return					
		Verification of separate residence (utility bills submission	, lease agreement, etc.) dated	d prior to the FAFSA			
		Proof of income for each member in the house for the student.	shold of the parent who prov	vided the most support			
		Other					
Aid O	ffice.	that I may be required to provide additional in	•				
I agree	e to pro	vide proof of any of the information provided, my circumstances before the end of the year. formation for federal funds is a fine, prison sent	and to let the financial aid of understand that the penalty	office know if anything y for providing false or			
~	. ~:			_/			
Student's Signature				Date			
				_//			
Parent or Spouse's Signature				Date			
Return form to			For Questions				
Mail: Office of Financial Aid Glenville State University 200 High Street Glenville, WV 26351		le State University gh Street	Phone: 304-462-6170 Email: financial.aid@glenville.edu				

Email: financial.aid@glenville.edu