

www.fhtc.edu

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2024-2025 Special Circumstances Appeal

The FHTC Financial Aid Office recognizes that families may experience a change in their financial situation from the 2022 federal tax information reported on the FAFSA. Through the use of professional judgement, a financial aid administrator may be able to make adjustments to your FAFSA which could result in a recalculation of your federal aid eligibility.

Student Info	rmation							
Last Name	First Name	M.I.	Social Security Number	Date of Birth				
Address			() Home Phone number	() Student's Cell Phone number				
ridui C33			Home I none number	statenes den i none namber				
City	State	Zip Code	Student's Email Ad	dress				
Documentat	ion Required							
To ensure cons	ideration of your request, please read the e	ntire form	and submit the documentatio	on listed below.				
Special C	ircumstances Appeal Form: submit this	documen	t with all appropriate signatu	ires.				
Appeal Lo	etter: Provide a letter of appeal detailing	your situa	tion with current contact info	ormation.				
Supporti	ng documentation: 2022 Tax Return Trai	nscript (oi	r DRT used in FAFSA), W-2s,	paystubs, tax returns, etc.				
Special Circu	ımstances							
	tion that applies and submit all appropriat	a hullatad	itams from halow agah hay ah	and and				
			•	ecneu.				
	ase in student/spouse income (Independe		-	Jacambar 31 2024 (Complete				
O	 Must include an estimate of gross income from work from January 1, 2024 to December 31, 2024. (Complete income worksheet on back) Student \$							
0								
0								
0	 Termination notice from employer on letterhead with last date of employment 							
0	Letter of resignation							
Decrea	ase in parent(s) income (Dependent Stude	ents)						
0	M - 1 1 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -							
	income worksheet on back) Student \$ Parent \$							
0	 Documentation of income from other sources, such as unemployment compensation 							
0								
0								
0	Letter of resignation							
Lump	sum distribution or non-recurring income	e that infla	ted the Adjusted Gross Incon	ne				
0	Signed itemized statement of how that i		as spent					
0	Copy of 1099-R (for IRA or pension roll	over)						
Divorc	ce/Separation							
	Divorce decree/separation agreement is	f legally se	eparated (must include date o	of divorce/separation).				

Independent Student/Spouse Information

Attach wage statements from current and/or former employer(s) showing actual earnings for year-to-date 2024. Attach any other documentation supporting income sources.

Total Expected Income					
	Actual Amount from		Estimated Amount from		Yearly
	1/1/24 to		//24 (today's date) to		Amount
	/24 (today's date)		12/31/24		
Student's gross wages	\$	+	\$	=	\$
Spouse's gross wages	\$	+	\$	=	\$
Other expected income	\$	+	\$	=	\$
Unemployment compensation	\$	+	\$	=	\$
Child support received	\$	+	\$	=	\$
Social Security payments	\$	+	\$	=	\$
Total Estimated 2024 Income \$				\$	

Dependent Parent(s) Information

Attach wage statements from current and/or former employer(s) showing actual earnings for year-to-date 2024. Attach any other documentation supporting income sources.

Total Expected Income					
	Actual Amount from		Estimated Amount from		Yearly
	1/1/24 to		//24 (today's date) to		Amount
	/24 (today's date)		12/31/24		
Parent 1 gross wages	\$	+	\$	=	\$
Parent 2 gross wages	\$	+	\$	=	\$
Other expected income	\$	+	\$	=	\$
Unemployment compensation	\$	+	\$	=	\$
Child support received	\$	+	\$	=	\$
Social Security payments	\$	+	\$	=	\$
			Total Estimated 2024 Incor	ne	\$

Certification and Signatures

		eported on this appeal worksheet is complete and correct to the tion as indicated above. The student must sign and date.
Student's Signature	Date	_
The parent must also sign and date if informatio	n was reported	on the FAFSA.
Parent's Signature		
Parent contact information: e-mail:		phone number:

 $WARNING: If you \ purposely \ give \ false \ or \ misleading \ information \ on \ this \ worksheet, you \ may \ be \ fined, sentenced \ to \ jail, \ or \ both.$