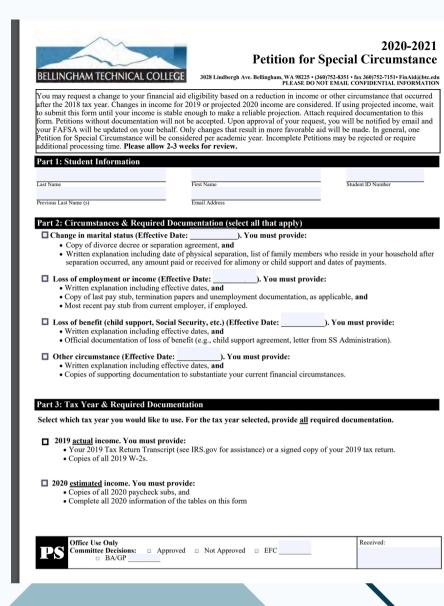


FINANCIAL AID MODIFICATION



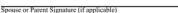


Part 4: Taxable Income complete if using 2	2020 tax year		
2020 Taxable Income	2020 Actual 01/01/20 to Present	2020 Estimated Present to 12/31/20	2020 Total Actual + Estimat
Student wages, salaries and tips	\$	\$	S
Spouse wages, salaries and tips	\$	\$	S
Business income	\$	\$	S
Unemployment compensation	\$	\$	S
Other taxable income (including alimony, Social Security, etc.)	\$	\$	S
Total Taxable Income	S	\$	S

Part 5: Untaxed Income				
Complete the section for	2019	2020		
Complete the section for your selected tax year only	Skip if using 2020 tax year	Actual 01/01/20 to present	Estimated Present to 12/31/20	2020 Total Actual + Estimate
Child Support Received	\$	\$	\$	S
Workers' compensation	\$	\$	\$	\$
Veteran's non-education benefits	\$	\$	\$	s
Life Insurance received	\$	\$	\$	S
Funds paid on your behalf and other income benefits or wages not subject to taxation		S	s	s
Total Untaxed Income	S	\$	\$	S

Part 6: Income Exclusion Complete the section for	2019	2020		
your selected tax year only	Skip if using 2020 tax year	Actual 01/01/20 to present	Estimated Present to 12/31/20	2020 Total Actual + Estimated
Child Support Paid	\$	s	\$	s
Total Untaxed Income	S	S	5	S

certify that I have read this form carefully and the information provided is true and corr nowledge.	ect to the best of my
0	
tudent Signature	Date



<u>htt</u>	<u>ps:/</u>	//w/

Petition for Special Circumstances Where to find this form: ww.btc.edu/CurrentStudents/Fi <u>nancialResources/FinancialAid.aspx</u>

PART 1:

STUDENT INFORMATION

*First & Last name as listed on FAFSA/WAFSA



2020-2021 Petition for Special Circumstance

3 28 Lindbergh Ave. Bellingham, WA 98225 • (360)752-8351 • fax 360)752-7151 • FinAid@btc.edu PLEASE DO NOT EMAIL CONFIDENTIAL INFORMATION

You may request a change to your fin incial aid eligibility based on a reduction in income or other circumstance that occurred after the 2018 tax year. Changes in income for 2019 of projected 2020 income are considered. If using projected income, wait to submit this form until your income is stable enough to make a reliable projection. Attach required documentation to this form. Petitions without documentation will not be accorded projected. Upon approval of your request, you will be notified by email and your FAFSA will be updated on your behalf. Only changes that result in more favorable aid will be made. In general, one Petition for Special Circumstance will be considered per academic year. Incomplete Petitions may be rejected or require additional processing time. Plez se allow 2-3 weeks for review.

Part 1:	Stud	ent In	forma 🐨
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Last Name

Previous Last Name (s)

First Name

Email Address

*Only applies if recently married or divorced Student ID Number

*Double check it is written correctly

Part 2:

Circumstances & Required Documentation

Part 2: Circumstances & Required Documentation (select all that apply)

Change in marital status (Effective Date:

te: _____). You must provide:

- Copy of divorce decree or separation agreement, and
- Written explanation including date of physical separation, list of family members who reside in your household after separation occurred, any amount paid or received for alimony or child support and dates of payments.

Loss of employment or income (Effective Date:

- Written explanation including effective dates, and
- Copy of last pay stub, termination papers and unemployment documentation, as applicable, and
- Most recent pay stub from current employer, if employed.

Loss of benefit (child support, Social Security, etc.) (Effective Date: _____). You must provide:

- Written explanation including effective dates, and
- Official documentation of loss of benefit (e.g., child support agreement, letter from SS Administration).

Other circumstance (Effective Date: _____). You must provide:

- Written explanation including effective dates, and
- Copies of supporting documentation to substantiate your current financial circumstances.

Part 3: Tax Year & Required Documentation

*loss of employment or income could be you as the individual, your spouse, or your parent(s)/guardian(s)

). You must provide:

Double check required document(s)

If possible, make copies of submitted documents for your own record.

Include dates, such as last day worked.

Include how it impacts ability to pay for school.

Be as specific as possible for written explanations! This could speeded up the appeal process.

Family disaster or natural disaster

Ex. Landslides



Ex. COVID-19, one time work bonus, cashing in 401K, inheretance

OTHER CIRCUMSTANCES

Extraordinary **Expenses**

Ex. High medical/dental expenses, a family member becomes ill, a parent or spouse becomes incarcerated

Any Others?

This list isn't exhaustive!!! If you're unsure if you qualify for a special circumstance, email your financial department to see if you're eligble!



WRITTEN **EXPLANATION EXAMPLES**

JOB LOSS "Due to losing my job, I've had a \$6,000 reduction of income since my last tax return."

EXTRA-ORDINARY EXPENSES

"Due to breaking my leg, I had to get surgery which resulted in \$2,000 out of pocked expenses that weren't covered by my insurance."

WORK BONUS "My 2018 tax income included a one time work bonus of \$ which I didn't receive the following year."

SEASONAL JOBS

"Due to lower production levels this year, the company greatly reduced our hours resulting in a loss income of \$_"

> *Seasonal jobs includes: agriculture, warehouse, construction. etc.

Part 3 through 6:

Carefully follow the steps listed for each section

Part 3: Tax Year & Required Documentation Select which tax year you would like to use. For the tax year selected, provide <u>all</u> required documentation.		Part 5: Untaxed Income Complete the section for your selected tax year only
 Your 2019 Tax Return Transcript (see IRS.gov for assistance) or a signed copy of your 2019 tax return. Copies of all 2019 W-2s. 		Child Support Received
 2020 <u>estimated</u> income. You must provide: Copies of all 2020 paycheck subs, and 		Workers' compensation Veteran's non-education benefit
Complete all 2020 information of the tables on this form	PART 4	Life Insurance received
Office Use Only Committee Decisions: Approved Not Approved EFC		Funds paid on your behalf and o income benefits or wages not sul to taxation
	Taxable Income	Total Untaxed Income

PART 3 Tax Year & Required Documentation

2020 Taxable Income	2020 Actual 01/01/20 to Present	2020 Estimated Present to 12/31/20	2020 Total Actual + Estimated
Student wages, salaries and tips	\$	\$	s
Spouse wages, salaries and tips	s	\$	s
Business income	\$	\$	s
Unemployment compensation	\$	\$	\$
Other taxable income (including alimony, Social Security, etc.)	s	\$	\$
Total Taxable Income	S	\$	S

PART 5 Untaxed Income



	2020		
20	Actual 01/01/20 to present	Estimated Present to 12/31/20	2020 Total Actual + Estimated
	\$	\$	S
	\$	S	\$
I	\$	\$	s

PART 6 Income Exclusion

Conselected to an effect from	2019	2020		
Complete the section for your selected tax year only	Skip if using 2020 tax year	Actual 01/01/20 to present	Estimated Present to 12/31/20	2020 Total Actual + Estimated
Child Support Paid	S	S	\$	S
Ciniu Support Falu	·	*		
Total Untaxed Income Signature	S	S	S	\$
Total Untaxed Income	S	S	s e and correct t	

Get in Touch with Financial Aid https://www.btc.edu/CurrentStudents/Fi nancialResources/FinancialAid.aspx

MAILING ADDRESS 3028 Lindbergh Ave. Bellingham WA 98225 EMAIL ADDRESS finaid@btc.edu PHONE NUMBER (360)752-8351

