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Student’s Name Social Security Number

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Home Phone Number Cell Phone Number

Niagara County Community College

The Smart Place to Start

**FINANCIAL AID SPECIAL CIRCUMSTANCES APPEAL OPPORTUNITY**

2021-2022 Award Year

Students and their families often experienced unforeseen circumstances and/or expenses during the past academic year due to Covid 19. If you have encountered a significant reduction of income (since 2019), you may fill out this form to determine if you are eligible for any additional federal aid. To help us make this determination, please submit a **(2021-22 Verification Worksheet)** along with a clear explanation and reasonable documentation.

1. Briefly describe your circumstances below:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Please check the box that applies to your situation:

Unemployment or change in employment

( )Student/ Spouse ( ) Parent

Date of occurrence:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Submit last cumulative pay stub, a letter from the employer (termination, lay off, etc.), and approval of unemployment benefits letter.

Divorce/Separation—Provide earlier date

Date of occurrence:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Submit a copy of a divorce decree or separation papers. If legal action has not been started, please provide documentation of separate residences (current utility bills from each household).

Death of parent (if dependent) or spouse

Date of occurrence:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Submit a copy of death certificate.

Disability of student, spouse, or parent

Date of occurrence:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Submit a letter from your physician, approval notice from worker’s compensation, or approval notice from disability compensation.

1. Complete this form on the back estimating taxable and non-taxable income for 2021.
2. Sign this Certification: All of the information on this form and attached documentation is true and complete to the best of my knowledge. **Failure to submit all required documentation will result in the return of the request.**

Student:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Spouse:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

(Father/Mother/Stepparent)

**PLEASE BRING THIS COMPLETED FORM TO OUR FINANCIAL AID OFFICE AFTER JULY 1, 2021 ALONG WITH A COPY OF YOUR 2019 TAX RETURNS AND ANY OF THE ABOVE DOCUMENTS REQUESTED.**

**ANY REQUEST AFTER NOVEMBER 1ST MUST BE SUBMITTED WITH A 2021 TAX RETURN.**

**ESTIMATED 2021 INCOME** (IF SUBMITTING YOUR REQUEST AFTER NOVEMBER 1ST, DO NOT ESTIMATE 2021 INCOME. PLEASE PROVIDE YOUR 2021 TAX RETURN INSTEAD.)

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Annual Taxable Income** | **Student** | **Spouse** | **Mother/****Step-Mother** | **Father/****Step-Father** |
| Wages, Salaries, Tips | $ | $ | $ | $ |
| Interest | $ | $ | $ | $ |
| Dividends | $ | $ | $ | $ |
| Unemployment | $ | $ | $ | $ |
| Distributions | $ | $ | $ | $ |
| Pensions | $ | $ | $ | $ |
| Alimony | $ | $ | $ | $ |
| Business/Farm Income or Loss | $ | $ | $ | $ |
| Rental Income or Loss | $ | $ | $ | $ |
| Other Taxable Income | $ | $ | $ | $ |
| **Annual Untaxable Income** | **Student** | **Spouse** | **Mother/****Step-Mother** | **Father/****Step-Father** |
| Social Security Benefits | $ | $ | $ | $ |
| Child Support | $ | $ | $ | $ |
| AFDC/ADC/TANF | $ | $ | $ | $ |
| Other Welfare Benefits | $ | $ | $ | $ |
| **Personal Contributions to Retirement Accounts** | $ | $ | $ | $ |
| Other Untaxed Income | $ | $ | $ | $ |
| **Total 2021 Estimated Income** | $ | $ | $ | $ |

|  |
| --- |
| Office Use Comments: |
|  |
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|  |
| Decision Status: Initials/Date: |

Niagara County Community College

The Smart Place to Start

2021 - 2022 VERIFICATION WORKSHEET

**Federal Student Aid Programs**

Your application was selected for review in a process called “*Verification*.” In this process, Federal law requires that the Financial Aid Office compare information from your application with SIGNED copies of your financial documents before awarding Federal aid. If there are differences between your application information and your financial documents, corrections may need to be made.

**Complete the following as soon as possible to expedite your financial aid. Complete ALL sections. Do not leave** **any blanks**. If the answer is zero or no, please write “0” or “No”.

**A. STUDENT INFORMATION**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Last Name First Name M.I.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Social Security Number (Area code) Home Phone # Cell Phone #

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_

Address (include apt. no.) City State Zip code Date of Birth

**B. FAMILY INFORMATION: Complete the chart using ONE of the instructions below –**

 **Dependent OR Independent**

 **DEPENDENT STUDENT** **INDEPENDENT STUDENT**

If required to give parental information when applying List the people that you (and your spouse) will

for Federal Student Aid, list the people your parent(s) support between July 1, 2021 and June 30, 2022.

will support between July 1, 2021 and June 30, 2022. Include: 1) Yourself, 2) Your spouse, 3) Your dependent

Include : 1) Yourself, 2) Your parent(s), 3) Your parent’s child(ren) and other people living with you only if you

child(ren) and other people living with parent(s) if they (or your spouse) will provide more than half their

will provide more than half their support. support.

|  |  |  |  |
| --- | --- | --- | --- |
|  FULL NAME**List all family members in****household below** | AGE | RELATIONSHIP | COLLEGE**List only if attending at least half-time between 7/1/21 and** **6/30/22 and enrolled in a degree or certificate program**.  |
|  |  | SELF | Niagara County Community College |
|  |  |  |  |
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**SEE BACK**

 **C. Check the appropriate box below to indicate if you filed taxes or not:**

Check here if you (the student) or your spouse (if married) filed or will file a 2019 Federal Income Tax Return. If IRS data retrieval tool was **not** used, return to [www.fafsa.ed.gov](http://www.fafsa.ed.gov) to make corrections using the IRS data retrieval tool or provide a **signed** copy for your 2019 1040 tax return.

Check here if you (the student) or your spouse (if married) are not required to file a 2019 Federal Income Tax Return. If you (and/or spouse) did not file a tax return, you will need to contact the IRS and request a statement of non-tax filing status Form 4506-T.

|  |
| --- |
| **D. Dependent Students Only- Check the appropriate box to indicate if your parent(s) filed taxes or not:**  |

 Check here if parent(s) filed or will file a 2019 Federal Income Tax Return. If the IRS data retrieval tool was **not**

used, return to [www.fafsa.ed.gov](http://www.fafsa.ed.gov) to make corrections using the IRS data retrieval tool or provide a **signed** copy of your 2019 1040 tax return.

 Check here if your parent(s) are not required to file a 2019 Federal Income Tax Return. If parent(s) did not file a

 tax return, you will need to contact the IRS and request a statement of non-tax filing status Form 4506-T.

**E. NONTAXABLE INCOME: List all sources of untaxed income received in 2019.**

 **Indicate “0” if none received.**

***\*\*\*DO NOT LEAVE ANY BLANKS. If the answer is zero or no, please write “0” or “No”.***

|  |  |  |
| --- | --- | --- |
| **Source**  | **Student / Spouse** | **Parent(s)** (Dependent Students Only) |
| W-2 earnings from work (**only if NO tax return was filed**) | $ | $ |
| 401K on **W2 boxes 12a through 12d codes D, E, F, G, H, S** | $ | $ |
| Workers Compensation | $ | $ |
| Child Support Received | $ | $ |
| Untaxed Pensions  | $ | $ |
| Other: | $ | $ |

 YES NO YES NO

Did you and/or parent(s) receive Public Assistance?    

Did you and/or parent(s) receive Social Security?    

Did you and/or parent(s) receive SNAP (Food Stamps)?\*    

**F. SIGNATURES: By signing this worksheet, I (we) certify that all the information reported for**

 **Federal Student Aid is complete and correct.**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Student’s signature Date Spouse’s signature (optional) Date

**DEPENDENT students only: Only one parent needs to sign below**

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent 1 (Father/Mother/Stepparent) Signature Date Parent 2 (Father/Mother/Stepparent) Signature Date

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