



444 Green Street, Gardner, MA 01440-1000

CHANGE IN FAMILY CIRCUMSTANCES
Special Circumstances
2011-2012
DEPENDENT STUDENT

Financial Aid Office (978)630-9169

STUDENT NAME (PRINT): ID #:

ADDRESS: Street City State Zip

Your eligibility for federal financial aid was based upon you and your family's 2010 income and asset information. If your finances have changed due to extenuating circumstances, please complete the following information.

A copy of the students and parents 2010 income tax forms must be attached to the this form.

Please check the appropriate section(s) below which describe your special circumstances:

- A reduction in student or parent income will occur in 2011 due to a loss of job or reduction in hours (do not include loss or reduction of uncontrollable overtime).
A loss of benefits such as child support, unemployment compensation, or disability income will occur in 2011.
Parent separated/divorced since the aid application was filed. Provide only the income information for the custodial parent (parent supplying more than 1/2 support to student).
Parent(s) has/have paid excessive medical expenses in 2010. Attach a separate statement with supporting documentation
Parent(s) paid private elementary or secondary school tuition.
Other - Please list:

Please provide a written letter of explanation detailing the special circumstance(s), signed by the student and the parent. Be sure to include dates and amounts. The more information you can provide the easier it will be for the Financial Aid Office to consider a change in financial aid information.

Please project to the best of your ability you and your family's 2011 income and benefits received and/or to be received (January 1, 2011 - December 31, 2011). This form will not be processed without supporting documentation (ie. pay stubs, tax returns, W2s etc).

Table with 4 columns: Category, MOTHER - 2011 Yearly Amount, FATHER - 2011 Yearly Amount, STUDENT - 2011 Yearly Amount. Rows include Income Earned from Work, Other Taxable Income, TANF/welfare, Child support/Alimony, Unemployment benefits, Other Untaxed income/benefits, Severance Payments, Child support to be paid, and Other.

We hereby certify that the information listed above is true and accurate to the best of my (our) knowledge. If asked by the Financial Aid Office, we agree to submit additional proof of the information that we have given on this form. We, also, realize that if we do not submit documentation when asked, this request will not be considered.

Student's Signature

Date

Parent(s) Signature

Date