

# 2019-2020 - Centralia College Special Condition Application Form - Dependent

Student Name \_\_\_\_\_

Address \_\_\_\_\_  
Street City State Zip code

Social Security Number \_\_\_\_\_ Phone Number \_\_\_\_\_

Check the box that reflects your situation and return this completed form along with:

- 1) **Signed copy of student's and parent's (if applicable) 2017 and 2018 tax return OR transcripts (if filed).**
- 2) **A brief letter explaining your situation - signed by both student and parent.**
- 3) **Any additional documentation listed below:**
  - If Unemployment/Reduced hours: Copy of employment termination or notification of reduction in hours from employer, verification of unemployment insurance payments and copy of last paystub.
  - If one-time income: documentation of the one-time income (ex. 1099, tax schedules, etc.).
  - If death of a wage earner: a copy of the death certificate, documentation of any insurance payment expected to be received, etc.
  - If divorce/separation: copy of legal separation or divorce papers, clear documentation concerning expected child and/or spousal support payment, and W2's for separation of income.

**Loss of Income**  
 My family's income has declined since 2017 due to:  
 unemployment,  retirement,  change of employer,  reduction in hours,  a one-time income received in 2017,  death of a wage earner,  divorce/separation.

Household size in 2019-2020 year: \_\_\_\_\_ # in Household \_\_\_\_\_ # in College

Parent and Student Income Information	<u>Calendar Year</u> <small>Jan. 2019- Dec. 2019</small>	<u>Academic Year*</u> <small>July 1, 2019 – June 30, 2020</small>
Mother's Gross Income from Work	\$	\$
Father's Gross Income from Work	\$	\$
Parent's Other Taxable Income - Please circle:(ex. alimony received, business/farm income, rental income, unemployment, capital gains, interest/dividends, other _____)	\$	\$
Parent's Other Non-Taxable Income - Please circle: (ex. child support received, military benefits other than educational benefits, tax-deferred pensions, , other _____)	\$	\$
Parent's Income Exclusions – Please circle: (ex. child support PAID, AmeriCorps award, military benefits other than educational benefits, tax-deferred pensions, , other _____)	\$	\$
Student's Gross Income from Work	\$	\$

**\*Academic Year requests will not be accepted until December 2, 2019**

**CERTIFICATION: I certify that the information provided on this form is true and figures provided are accurate to the best of my ability.**

\_\_\_\_\_  
 Student Signature/Date

\_\_\_\_\_  
 Parent Signature/Date

**Note: Special Condition Applications will be considered incomplete if documentation is not provided to support changes. Provide a clear statement that gives a time-line to your income/situation change. Please be specific about the date(s) that changes occurred as well as any amounts. Notification and documentation for all current and anticipated income must be provided based on the calendar year or academic year information being reviewed.**

***Incomplete paperwork will not be processed. If you have any questions please contact our office at [financialaid@centralia.edu](mailto:financialaid@centralia.edu) or 360-623-8975.***