The Federal Government requires that you and, if applicable, your parents or spouse complete the 2014-2015 Free Application for Federal Student Aid using income information from the 2013 tax year. However, a school has been given the discretion by the government to review a student’s situation, as needed, and exercise professional judgment when special circumstances arise that affects that information.

At MACU, we will only consider this option if the anticipated household income for 2014 is going to be at least a 15% decrease from the 2013 income and is due to one of the conditions below. Please complete the appropriate section and the back of this page. This form will not be accepted before March 1, 2014.

**CONDITION A**

____ A student, student’s spouse, or a dependent student’s parent (circle one) whose 2013 income from work was reported but has been unable to pursue the normal income producing activities for at least ten weeks in 2014 because of the following:

____ A disability (please specify) ____________________________________________________________

____ A natural disaster (please specify) ______________________________________________________

____ Return to school full-time (12 hours or more during a semester) to further education.
   Name of school attending: ________________________________________________________________

____ Other reason (Please describe): _________________________________________________________

Former Employer’s Name: _________________________________________________________________

Date full-time employment ceased: _________________________________________________________

**CONDITION B**

A student, spouse, or parent (circle one) 1. Benefited from a one-time income in 2013 such as an inheritance, moving expense allowance, IRA, etc. or 2. Stopped receiving a specific benefit in 2014 such as child support or Social Security which will not resume in the foreseeable future.

Source of income: __________________________________________________________Amount received in 2013: $________

Reason for cancellation if #2: _____________________________________________________________

**CONDITION C**

Due to separation, divorce, or death (circle one) of a spouse or parent (circle one), the student’s household income for 2014 will be less than 2013. Date of status change: ____________

**2014 INCOME PROJECTIONS**
TO BE COMPLETED BY ALL APPLICANTS

If the special circumstances you described apply to you and/or your spouse, answer these questions about yourself and/or your spouse. If the special circumstances you described apply to your parents, answer these questions about them.

In your estimates be sure to combine all income and benefits you have received from January 1 of 2014 through today, with income and benefits you expect to receive from this date through December 31, 2014. Please provide a copy of your pay stubs. You may be asked to provide other documents to verify the reported figures below.

1. In 2014 how much will the dad/student expect to earn from work? $____________.00
2. In 2014 how much will the mom/spouse expect to earn from work? $____________.00
3. Other taxable income expected in 2014 (please identify: _________________) $____________.00
4. 2014 untaxed income and benefits:
   4a. Social Security benefits $____________.00
   4b. Estimated Earned Income Credit $____________.00
   4c. Aid to Families with Dependent Children (AFDC or ADC) $____________.00
   4d. Child support received for all children $____________.00
   4e. Other untaxed income and benefits. This line should include any untaxed contributions made to retirement or pension plans as well as income received, or expect to be received from sources such as retirement benefits, worker’s compensation, welfare benefits (other than AFDC or ADC), military benefits, housing, food, or other allowance paid for you. $____________.00

READ AND SIGN:

Certification: All of the information on this form is true and complete to the best of my knowledge. If asked by an authorized official, I agree to give proof of the information that I have given on this form.

Applicant must always sign. A parent must sign if information has been given about parents.

Applicant Signature: _____________________________________________ Date: ____________________

Parent Signature: _____________________________________________ Date: ____________________

RETURN THIS FORM TO THE FINANCIAL AID OFFICE AT MACU

FOR OFFICE USE ONLY:

_____ Approved    _____ Denied    Reviewed By: ______________________________

_____ Old EFC     _____ New EFC   Date: ______________________________

Rationale: