WEST TEXAS A&M UNIVERSITY

Financial Aid Office

Phone: 806-651-2055 FAX: 806-651-2924

financial@wtamu.edu

SPECIAL CIRCUMSTANCES APPLICATION

Applic	nt's Name: Buff ID:				
E-Mail					
If the f	nancial situation for you, your spouse, or your parents has significantly changed from 2021 to 2022, please complete the ng:				
	SPECIAL INSTRUCTIONS				
1. 2. 3.	Dependent Students - Provide information and documentation regarding parents (and/or yourself, if applicable).				
_	4. Financial aid may be delayed until a decision is made on the special circumstance application.				
NO	TE: APPLICATION MUST BE COMPLETE AND INCLUDE REQUIRED DOCUMENTATION.				
	gret we cannot review incomplete applications; the application may be returned to the applicant. contact the Financial Aid Office for assistance if required.				
the ci regar and 2	QUIRED: Provide a brief explanation below regarding your special circumstance, including dates related to cumstance. Use the back of this form or attach additional information as needed. Provide copies of letters ling job lay off or job termination. For changes regarding income, provide complete copies of 2021 022 tax returns and W2's and other income documentation. Use the student portal to upload nents that contain personally identifying information such as social security numbers.				

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Applicant's Name: I	Buff ID:		
Before your status can be evaluated you must provide coin the financial situation for you, your spouse, or your paperiod January 1, 2022 to December 31, 2022.			
B. Taxable Income for 2022 ** Attach statements or check stubs showing 2022 year	r-to-date earnings. ³	You/Your Spouse	Your Parents
How much you / your father earned from work.		\$	\$
How much your spouse / your mother earned from work.		\$	\$
How much you / your spouse / your parents received in unemployment benefits.		\$	\$
How much you / your spouse / your parents had in other taxable income (i.e. inte	erest, etc.).	\$	\$
Total 2022 Income:		\$	\$
C. Untaxed Income and Benefits for 2022		You/Your Spouse	Your Parents
Social Security Benefits.		\$	\$
Aid for Families with Dependent Children (AFDC or ADC)		\$	\$
Other untaxed income and benefits (i.e. child support, workers comp, military al	llowance, etc.)	\$	\$
Total 2022 Untaxed Income and Benefits:		\$	\$
D. Amount of Unusual Expenses that were paid in 2022 ** For 2022 medical expenses – attach 2021 tax return w For other 2022 expenses – attach copies of "PAID" re		You/Your Spouse	Your Parents
Expense Type:		\$	\$
Expense Type:		\$	\$
Amount Paid by Insurance:		\$	\$
Net 2022 Unusual Expenses (total expenses minus insurance):		\$	\$
E. CERTIFICATION: By signing below, I certify that all of the information official, I agree to give proof of the information that I have given on this form. I realized not give proof when asked, the student's application may not be processed for final documentation.	ze that this proof may incl ncial aid. I understand n	ude a copy of my U.S. Income Ta ny application will not be review	x Return. I also realize that if I wed without the required
Date:	Father's Signature	Date: _	
Date:		Date:	
Date:			
Office Use Only: Approved/Denied Initials Date Approved/Denied Initials Initials Approved/Denied Approved/Denied Initials			

Comments: