



Student name \_\_\_\_\_

COCC ID number \_\_\_\_\_

This form is used to request a review of your financial aid eligibility as a result of special circumstances which occurred after your 2023-24 FAFSA® was filed. **If you are requesting an adjustment due to a change in wages or unemployment, you must use the Employment or Unemployment Adjustment form.**

**Please note:**

- Allow up to 4 weeks for processing. Completed forms must be received by June 30, 2024.
- Submission of this request does not ensure a change or increase in your offer. You will be notified via email of the decision.

**Section 1 - Individual Requesting Change**

I have attached a personal statement regarding special circumstances for the individual indicated below (please check one):

- Parent Special Condition** - Please attach a personal statement explaining parent special circumstances.
- Student Special Condition** - Please attach a personal statement explaining student special circumstances.

**Section 2 - Verification Required**

For COCC to correctly review this Special Conditions form, we will select your file for verification and request the following information:

**For dependent students**

- Signed copy of parent(s) and student 2021 Federal Tax Return Transcript.
- Copies of parent(s) and student 2021 W2s if you were not required to file a tax return.
- Dependent Verification Worksheet.

**For independent students**

- Signed copy of student/spouse 2021 Federal Tax Return Transcript.
- Copies of student/spouse 2021 W2s if you were not required to file a tax return.
- Independent Verification Worksheet.

I have already submitted these documents.

By signing this form, I certify the information reported is true and accurate. Adobe or signature type fonts cannot be accepted.

Student signature \_\_\_\_\_

Date \_\_\_\_\_

Parent signature (if dependent) \_\_\_\_\_

Date \_\_\_\_\_

**Financial Aid Office**  
 541.383.7260 • fax: 541.383.7506  
 2600 NW College Way, Bend, Oregon 97703  
 www.cocc.edu/financial-aid • e-mail: coccfinaid@cocc.edu

|                                |                              |
|--------------------------------|------------------------------|
| <i>Office use only</i>         |                              |
| <input type="radio"/> Approved | <input type="radio"/> Denied |
| Initial _____                  | Date _____                   |

### SECTION 3 - Type of Condition

Please check the circumstance which applies and provide the additional information that is requested for each situation. The requested documentation must be attached to this form when returned to the Financial Aid Office.

| SPECIAL CONDITION  | PARENT  | STUDENT   | DOCUMENTATION   |
|--|---|---|---|
| <input type="checkbox"/><br>Parent attending college 2023-24               | A parent attending at least half-time.  |   | Documentation of enrollment.  |
| <input type="checkbox"/><br>Loss or reduction of child support or benefits | A parent who received income or benefits in 2022 had this income/benefit change during 2023 (e.g. child support or disability, etc.)  | You (or your spouse) received income or benefits in 2022, but had this income/benefit change during 2023 (e.g. child support, disability, etc.)   | On a separate sheet of paper, specify:<br>1. Type of income or benefit<br>2. Amount received during 2023<br>3. Reasons for change   |
| <input type="checkbox"/><br>Separation or divorce                          | Parents have separated or divorced <b>after</b> you applied for federal student aid.  | You and your spouse have separated or divorced <b>after</b> you applied for federal student aid.  | 1. Date of separation or divorce.<br>_____/_____/_____<br>2. Attach copy of legal separation agreement or dissolution decree or letter from a professional or agency documenting legal proceedings have begun relative to the separation/divorce.                                     |
| <input type="checkbox"/><br>Marriage                                       | Parent married <b>after</b> filing your 2023-24 FAFSA®. Form and documentation may be submitted for household size and income evaluation only.  | Dependent student requesting a marital status change <b>after</b> filing your 2023-24 FAFSA®. <b>Form and documentation must be submitted no later than September 15, 2023.</b>           | Must submit copy of marriage certificate.   |
| <input type="checkbox"/><br>Death  | A parent has died <b>after</b> you applied for federal student aid.   | Your spouse has died <b>after</b> the FAFSA® was submitted.   | 1. Name of deceased and relationship to student.<br>_____<br>2. Attach copy of death certificate, obituary notice or printed memorial program.  |
| <input type="checkbox"/><br>Unusual expenses                               | A parent incurred unusual expenses during 2022 and/or 2023 that has created financial hardship (e.g. medical, dental, legal, elementary/secondary school tuition, dependent care, etc.) | You/spouse incurred unusual expenses during 2022 and/or 2023 that has created financial hardship (e.g. medical, dental, legal, elementary/secondary school tuition, dependent care, etc.) | On separate sheet of paper, specify:<br>1. Description of expenses paid<br>2. Total amount of expenses paid<br>3. Explanation of hardship<br>4. Signed copy of Federal tax return for the same year.<br><b>IMPORTANT:</b> Documents supporting this expense must accompany this form. |
| <input type="checkbox"/><br>Other  | A parent has a situation you would like to have reviewed by a Financial Aid Administrator. Please explain the situation on a separate page.   | You have a situation you would like to have reviewed by a Financial Aid Administrator. Please explain the situation on a separate page.   | Please be as specific as possible in describing any change(s) in financial circumstances, explain how it has affected the ability of you and/or your parents to contribute to your education, and attach any relevant documentation.  |