

## 2023-24 Special Circumstance Information

Office of Student Financial Services - One University Ave - Bourbonnais, IL 60914  
Phone: (815) 939-5245 Fax: (815) 939-5074 Email: [studentfinance@olivet.edu](mailto:studentfinance@olivet.edu)

**IMPORTANT! PLEASE READ!** Enclosed you will find the 2023-24 Special Circumstance Form. Read through the entire form to determine which special circumstance you have experienced. **Please help us to help you!** Be organized and attach complete copies of all required documentation. This reevaluation will be based on the information you provide. Clearly identifying and documenting your special circumstance will greatly assist us in accurately reviewing your request in a timely manner. Additional information may be needed once your request has been received. Allow at least three weeks for processing after all documentation has been provided. Please understand that submission of a special circumstance form does not guarantee a favorable change in your financial aid eligibility. Each case will be evaluated on an individual basis.

---

### WHAT YOU NEED TO DO:

1. File your 2023-24 Free Application for Federal Student Aid (FAFSA) before you submit the Special Circumstance Form. You can complete the FAFSA online at [studentaid.gov/fafsa](https://studentaid.gov/fafsa). (Olivet's School Code is 001741)
2. Do not submit a Special Circumstance Form if your Expected Family Contribution (EFC) is zero (0)
3. Read and complete the Special Circumstance Form
4. Collect and organize your required supporting documentation
5. Submit all forms and documents to:

Olivet Nazarene University  
Office of Student Financial Services  
One University Ave  
Bourbonnais, IL 60914

### WHAT OLIVET WILL DO:

1. Review forms and documents submitted to ensure everything needed for your reevaluation is complete.
  - Incomplete or unsigned forms will be returned to you which will cause a review delay.
  - You may receive a letter or email requesting additional documentation.
2. Verify your FAFSA based on information submitted on verification forms and tax return documents.
3. Review documentation based on your Special Circumstance Request, adjust your FAFSA, and submit to the CPS (Central Processing System) for a revised EFC.
  - A revised offer will be available to view in your Self-Service portal if your financial aid changes due to the Special Circumstance Request. You will receive an email when the revised offer is available to view. If you are a new student, the Office of Admissions may contact you regarding any changes to your offer due to the Special Circumstance Request.
  - A letter or email will be sent if there are no changes to your financial aid due to the Special Circumstance Request.

- Special Circumstance Request – Page 1 of 2

- ☐ **E.** You or your spouse (if married) received some type of taxed or untaxed income or benefit for at least ten (10) weeks in 2021, but completely lost that income or benefit. (Income and benefits include such things as: Social Security benefits, court-ordered child support, retirement benefits or disability benefits. Don't include loss of veteran's educational benefits.)

**Required Supporting Documentation:**

1. A statement of termination from the source of income or benefit.
2. A signed copy of the student and spouse 2022 federal income tax return(s) including Schedules 1-3, A, and C.
3. A statement from the source of income or benefit indicating the dates you or your spouse received the income or benefit and the estimated income or benefits received in 2021.

- ☐ **F.** You or your spouse (if married) received a one-time income in 2021, such as Social Security, inheritance, IRA/pension distribution, etc.

**Required Supporting Documentation:**

1. A statement from the source of the one-time income indicating the amount.
2. A signed statement from you indicating the disposition of the funds.

- ☐ **G.** You or your spouse (if married) paid (not owed) a large amount of medical and/or dental expenses not covered by insurance in 2021.

**Required Supporting Documentation:**

1. A copy of your 2021 Federal Income Tax Return Schedule A, if expenses were itemized; OR
2. An itemized list of medical expenses paid in 2021 AND copies of receipts indicating date of payment or canceled checks for each medical expense listed (Explanation of Benefits from your insurance company will not be considered as proof of payment).

- ☐ **H.** You or your spouse (if married) paid private or parochial elementary and/or secondary (high school) tuition in 2021. (Calendar year)

**Required Supporting Documentation:**

1. A copy of paid receipts (**January – December 2021**) for private or parochial elementary and/or secondary tuition; OR
2. A statement from the education institution indicating tuition and fees paid (**January – December 2021**).

## STEP V: Your Family's Anticipated Income

If you checked options A-E above this step **must** be completed. You can skip STEP V if you checked options F-H above.

Do NOT leave any lines blank if required to complete this section. Enter "0" if a line does not apply. Incomplete forms will be rejected.

\_\_\_\_ Check here if filing this form before 7/1/2023. Estimate your income for all of 2023 below.

\_\_\_\_ Check here if filing this form on or after 7/1/2023. Estimate your income from 7/1/2023 through 6/30/2024 below.

During the 12-month period checked above, how much will you and your spouse:	Student	Spouse
1. Earn from work (W-2 wages, tips, etc.)?	\$	\$
2. Earn from Self-Employment? (Enter estimated Net Profit or Loss.)	\$	\$
3. Receive in Unemployment Compensation?	\$	\$
4. Receive in Workers' Compensation/Disability?	\$	\$
5. Receive in Social Security Benefits?	\$	\$
6. Receive in Pension/IRA Benefits?	\$	\$
7. Receive in Child Support?	\$	\$
8. Receive in Other Untaxed Income such as Military/Clergy Allowance?	\$	\$
9. Contribute pre-tax to an IRA and/or Keogh?	\$	\$

## STEP VI: Sign, Date, and Return to the Olivet Nazarene University Office of Student Financial Services

*I certify that ALL of the information on this form is complete and correct:*

\_\_\_\_\_  
Student Signature (Required) Date

\_\_\_\_\_  
Spouse Signature (Optional) Date

(Typed signatures will NOT be accepted.)

**WARNING: If you purposely give false or misleading information on this form, you may be fined, sentenced to jail, or both. If we have reason to believe that the information on this form is not accurate, we may require additional documentation.**