



Last Name

First Name

Student ID #

Student Email Address

Student Phone #

Parent Name

Parent Email Address

This form may be submitted if the information on your 2025-2026 FAFSA is no longer an accurate reflection of your current financial status due to an extenuating circumstance (divorce, loss of income, death of parent, medical expenses, etc.). Submission of this form does NOT guarantee an adjustment to your information will be made or that additional aid will be awarded. Aid adjustments are subject to program and funding restrictions.

Please submit the following:

- 2025-2026 FAFSA - If you haven't already done so.
- Written statement explaining the circumstances in detail.
- Additional supporting documentation to verify your circumstance as listed.
- Signed 2023 1040 form or Tax Return Transcript for student and spouse/parent(s), unless you successfully provided consent for the IRS to import your tax data on the FAFSA form.
- Complete the Verification form. (<https://www.wartburg.edu/financial-aid-policies/>)

Please check each of the following special circumstances that apply to your situation. Please provide the requested documentation along with this form and the items listed above.

☐ **Loss of Employment**

Include the following:

- Letter from employer documenting last date of employment.
- Documentation of year-to-date earnings, unemployment, and/or disability benefits.
- Copy of three most recent paystubs.

☐ **Reduction of Income**

Include the following:

- Name and relationship of person who had the reduction of income: _____
- Letter from student/parent explaining the circumstances surrounding the reduction of income.
- Anticipated income for 2024 - most recent paystub with year-to-date information.

☐ **Divorce/Separation** (only applies if both parents/spouse information is on the FAFSA)

Include the following:

- Court documentation verifying legal separation or divorce.
 - Please print the name of parent whose information will remain on FAFSA _____
 - Has the parent listed above remarried? ☐ Yes ☐ No
 - If yes, include new spouse's signed 1040 tax form for 2023.
 - Number of household members **after** separation/divorce (include the new spouse and children, if applicable): _____
- Proof of residence for each parent (i.e., utility bill).
- Copy of 2023 W-2s.

☐ **Medical** (only out-of-pocket expenses will be considered)

Include the following:

- Documentation and/or receipts of out-of-pocket expenses (can include hotels, food, mileage, etc). Schedule A of 2024 federal tax return or report money paid out-of-pocket for doctor, dentist, hospitalization, medication, etc.

☐ **Loss of Benefits** (Child Support/Unemployment)

Include the following:

- Documentation of the termination of benefits.
- Documentation of the year-to-date benefits received.

☐ **Death of Parent/Spouse**

Include the following:

- Copy of death certificate
- Current number of household members: _____
- Copy of most recent paycheck for surviving parent/spouse.

☐ **Children in Private K-12 Schools**

Include the following:

- Documentation of name of school.
- Documentation of school tuition and any discounts or scholarships anticipated.

I/we affirm that all the data elements contained on this form and the accompanying documentation are true and complete to the best of my/our knowledge. Upon request I/we will provide additional documentation to substantiate the information provided.

Student Signature: _____

Date: _____

Parent or Spouse Signature: _____

Date: _____

Important: Requests cannot be processed until ALL required documentation is received.