

Student ID:

2024-2025 Special Circumstance Request-One Time Income Exclusion

Student Ivanie.		
By signing below, I authorize McDowell Technical Community College to make the applicable changes electronically on my behalf. I further understand this may change federal or state aid I was previously awarded.		
Student Signature:	Date:	
Parent Signature:		

You have indicated there are circumstances that may affect the results of your Free Application for Federal Student Aid (FAFSA). Please follow instructions and submit all required documentation listed on the next page.

Instructions:

Student Name:

- Provide all documentation listed below. *Incomplete applications will not be reviewed or considered*.
- The student must provide a written statement to detail the circumstance(s) that are causing this request to be submitted. A parent may also submit a statement, but it will not replace the requirement of a student statement.
- Additional documentation may be provided as well, if the student/family feels it is relevant to the request.
- Requests are reviewed as they are received, however, review and processing of these requests may take 3-5 business days.
- Once you submit your request, check your MTCC student Gmail email *often*, as this is how the MTCC Financial Aid Office will communicate with you.
- Please contact the MTCC Financial Aid with any questions you have about completing this form and your specific circumstances.



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Student Name:	Student ID:
Name of the individual who received the one-time income:	
Relationship to the student (self, mother, father, etc.):	
Required Documentation:	
 Written statement from student outlining the circumstances Signed copies of 2022 and 2023 federal tax returns, including all W Schedules* *if applicable Verification of 2024 year-to-date earnings (i.e. pay stub, disability stat Documentation of one-time income received (1099-R for disbursementetc.) Receipts for usage of one-time income received 	ements, etc.)
By signing below, I attest that all information is true and accurate knowledge. Further, I understand that additional information may this review process and that incomplete applications will not be re	y be requested as a part of
Student Signature:	Date:
Parent Signature: (Required for dependent students)	Date: