



2009/2010 SPECIAL CIRCUMSTANCE PETITION—DEPENDENT STUDENT

<p>Please return to: Cuesta College Financial Aid Office P.O. Box 8106 San Luis Obispo, CA 93403-8106</p>	<p>Student's Last Name, First Name _____</p> <hr/> <p>Address _____ Telephone Number _____ () _____</p> <hr/> <p>Social Security # _____ Cuesta ID _____</p>
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INCOME REDUCTION—SPECIAL CONDITIONS:

1. If your income (and/or your parent's income) will be less in 2009 than it was in 2008, please check the appropriate reason below and explain, giving the date of the change in your situation. *DATE OF CHANGE:* _____

- Unemployment or change in employment
- Divorce/separation (if your parents are divorced or separated, give only information of the custodial parent.
- Death of parent (if the loss of income was due to the death of your parent, give only the information of your surviving parent)
- Disability of student or parent
- One-time income (examples; inheritance, moving expense allowance, back-year Social Security payments or IRA or pension distribution). Identify the sources and how the funds were spent or invested.

Explanation: _____

Provide anticipated <u>gross</u> resources for the following. <u>If none, please enter zero</u> DO NOT LEAVE ANY BLANKS	January 1, 2009 to December 31, 2009		January 1, 2009 to December 31, 2009
	Mother	Father	Student
Wages, salaries, tips, (including severance pay, disability payments and any income tax from work)			
Other taxable income (interest dividends, unemployment insurance compensation, business, rental, etc).			
Untaxed Social Security Benefits			
Temporary Assistance for Needy Families (TANF) / CAL-WORKS			
Child support received			
Other untaxed income (cash support)			
TOTAL ANTICIPATED INCOME			

- Persons providing information on this form are requested to attach the following documents:*

 - Most recent pay stub (from all employers)*
 - Final pay stub (from all employers)*
 - Termination Notice*
 - Severance Pay Statement*
 - Retirement Benefit Statement*
 - Federal Tax Return with all schedules*
 - 2008
 - 2009
 - IRS W2s from all employers for*
 - 2008
 - 2009
 - Dependent Student Verification Worksheet*

TURN OVER TO SIGN



2. Please explain your special circumstance (i.e., Parent in a college program at least half-time, medical, dependent care, how your current situation is different from the information reported on your 2009/2010 Financial Aid application), and ATTACH any supporting documentation.

Please provide the following information:

3. Monthly sources of income:	<u>STUDENT</u>	<u>PARENT</u>
a. How many hours per week are you working?	_____	_____
b. What are your wages per hour?	\$ _____	\$ _____
c. List any other monthly sources of income and amounts, besides Financial Aid and work.	\$ _____	\$ _____
TOTAL	\$ _____	\$ _____
4. Monthly Expenses:		
a. Rent	\$ _____	\$ _____
b. Utilities	\$ _____	\$ _____
c. Food	\$ _____	\$ _____
d. Transportation	\$ _____	\$ _____
e. Other	\$ _____	\$ _____
TOTAL	\$ _____	\$ _____

SIGNATURES ARE REQUIRED FOR ALL PERSONS REPORTING SPECIAL CIRCUMSTANCES.
 I/We hereby certify that all information reported on this form and any attachment hereto is true, complete and accurate. False statements or misrepresentation will be cause for denial, reduction, withdrawal, and/or repayment of financial aid.

Student's Signature	Date	Parent's Signature	Date
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- Student Approved
- Student Denied
- See EDE Notes

Comments _____

Financial Aid Officer Signature	Date
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