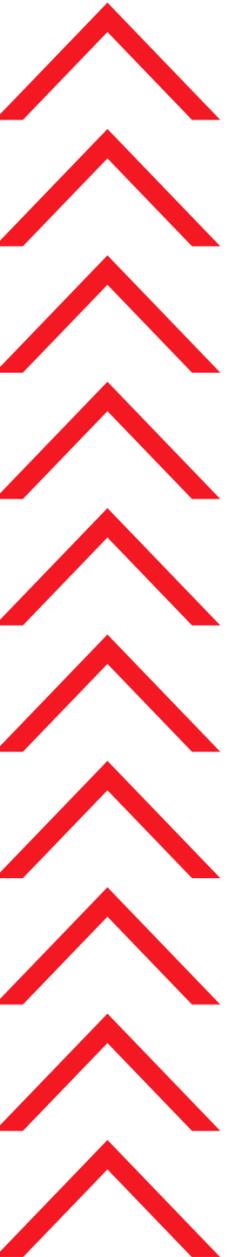


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# FINANCIAL AID MODIFICATION



Skagit Valley Community College

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# CHANGE OF CIRCUMSTANCES FORM

## WHERE TO FIND THIS FORM

<https://www.skagit.edu/financial-aid/forms-resources/>

**SVC** SKAGIT VALLEY COLLEGE  
Financial Aid

Financial Aid Office  
2405 E. College Way – Lewis 121  
Mount Vernon, WA 98273  
Phone: MV-360.416.7666/WIC-360.679.5320  
Fax: MV-360.416.7886/WIC-360.679.5375

**2019-2020 CHANGE OF CIRCUMSTANCE PETITION**  
(Petitioning to use 2018 income)

Student Name: \_\_\_\_\_ Address: \_\_\_\_\_  
Student SS#: \_\_\_\_\_  
Student ID#: \_\_\_\_\_ Phone: \_\_\_\_\_

Financial aid eligibility for 2019/2020 is based on 2017 family financial information. The Financial Aid Office will consider the use of 2018 information if you describe your new circumstances and the reason for the change from 2017 to 2018. Generally, the reason for change must be a situation that was "beyond your control". If your petition is accepted, the Financial Aid Office will make the adjustments to your information and your financial aid award can be re-determined.

Check applicable circumstance(s) and attach all required documentation:

**Change in marital status** (Effective Date of Change: \_\_\_\_\_)  
 • Copy of court divorce or separation agreement, or death certificate (as applicable)  
 • For separation/divorce, give explanation including dates of physical address separation, listing address of each party. Indicate if spouse will pay your mortgage/utilities, etc. Explain where children will live and give details and copies of child support agreement based on court decision, etc.  
 • Signed copy of your 2018 tax return and all W-2's and attachments. Include (ex) spouse's W-2's & 1099's if a joint tax return.

**Loss of employment or income reduction** (Effective Date of Loss: \_\_\_\_\_)  
 • Attached letter from you explaining loss of income situation and effective dates, and  
 • Copy of termination papers unless you received Unemployment  
 • Signed copy of your 2018 tax return and all W-2's and attachments

**Loss of benefit (child support, social security, etc.)** (Effective Date of Loss: \_\_\_\_\_)  
 • Attached letter from you explaining loss of income situation and  
 • Official documentation of loss of benefits including effective dates (e.g., child support agreement, letter from SS Administration)  
 • Signed copy of your 2018 tax return and all W-2's and attachments

**Another situation applies** (Effective Date: \_\_\_\_\_)  
 • Attached letter from you explaining the change in household/financial situation and  
 • Copies of supporting documentation to substantiate your new situation  
 • Signed copy of your 2018 tax return and all W-2's and attachments

**PLEASE NOTE:** If you submitted and had a petition approved for the prior 18-19 school year, and it is discovered you seriously under-reported your income, this and any future petitions will not be considered.

**ALL PETITIONS MUST INCLUDE:** A monthly breakdown of 2018 income on the back of this form. Make sure you breakdown all sources of income including gross wages, gross unemployment, child support, TANF, GAU, social security benefits, pensions, L&I, VA ed. and non ed. benefits, etc. If you are married, you must also breakdown your spouse's 2018 income. If you pay child support, be sure you make clear on the form that you pay this and are not receiving it. This breakdown gives us a full picture of the months you had limited income.

**CERTIFICATION:** I understand that submitting this form electronically as an email attachment using my SVC email account constitutes my signature and my certification that the information provided herein is complete and correct.

STUDENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_  
 Parent Signature (If student is dependent. Parent handwritten signature is required) \_\_\_\_\_  
 PARENT SIGNATURE \_\_\_\_\_ DATE \_\_\_\_\_

SVC FINANCIAL AID OFFICE USE ONLY			
<b>CH18</b>	<input type="checkbox"/> Request Approved	<input type="checkbox"/> Request Denied	<input type="checkbox"/> Pending
	INITIALS & DATE:		

**2018 INCOME**

\*Please list 2018 income each month or make note of how you lived on \$0 income, or the petition cannot be considered complete.  
 \*List only one employer or type of income per column and fill in the 'LIST SOURCE' at the top of each column.  
 \*If more than 3 income sources per person, attach an additional sheet.  
 \*If you paid child support in 2018, use one column for that and make sure you indicate "child support PAID" in 'LIST SOURCE' section. Proof may be necessary.

	STUDENT *(father)			SPOUSE *(mother)		
	Gross Wages LIST SOURCE:	Other Income LIST SOURCE:	Other Income LIST SOURCE:	Gross Wages LIST SOURCE:	Other Income LIST SOURCE:	Other Income LIST SOURCE:
January	\$	\$	\$	\$	\$	\$
February	\$	\$	\$	\$	\$	\$
March	\$	\$	\$	\$	\$	\$
April	\$	\$	\$	\$	\$	\$
May	\$	\$	\$	\$	\$	\$
June	\$	\$	\$	\$	\$	\$
July	\$	\$	\$	\$	\$	\$
August	\$	\$	\$	\$	\$	\$
September	\$	\$	\$	\$	\$	\$
October	\$	\$	\$	\$	\$	\$
November	\$	\$	\$	\$	\$	\$
December	\$	\$	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$	\$	\$

# Student Information

**\*As listed  
on your  
FAFSA/  
WAFSA**



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**\*Current  
Address**

## 2019-2020 CHANGE OF CIRCUMSTANCE PETITION (Petitioning to use 2018 income)

Student Name:

Student SS#:

Student ID#:

Address:

Phone:

**\*Double  
check for  
accuracy**

**\*Best phone  
number to be  
reached at**



# CHANGE OF CIRCUMSTANCES

Check applicable circumstance(s) and **attach all required documentation:**

- Change in marital status** (Effective Date of Change: \_\_\_\_\_)
  - Copy of court divorce or separation agreement, or death certificate (as applicable)
  - For separation/divorce, give explanation including dates of physical address separation, listing address of each party. Indicate if spouse will pay your mortgage/utilities, etc. Explain where children will live and give details and copies of child support agreement based on court decision, etc.
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  - Official documentation of loss of benefits including effective dates (e.g., child support agreement, letter from SS Administration)
  - Signed copy of your 2018 tax return and all W-2's and attachments
- Another situation applies** (Effective Date: \_\_\_\_\_)
  - Attached letter from you explaining the change in household/financial situation **and**
  - Copies of supporting documentation to substantiate your new situation
  - Signed copy of your 2018 tax return and all W-2's and attachments

## Check Required Document(s):

Always make a personal copy for your own records when sending in documents.

## Include dates:

Such as the last day you or a parent or spouse worked.

## Include How it Impacts Ability to Pay for School:

Be as specific as possible for written explanations! This could speed up the appeal process.

# ANOTHER SITUATION APPLIES?

## Family Disaster or Natural Disaster

Ex. Landslided

## Extraordinary Expenses

Ex. High medical/dental bills, family member becomes ill, a parent or spouse becomes incarcerated

## Other Instances

Ex. Covid-19, one time work bonus's, cashing in a 401k or inheritance

## Any Others?

These list are not exhaustive!! If you're unsure if you qualify for a *change of circumstances*, email your financial aid department to see!



# Written Explanation Examples

## **JOB LOSS**

"Due to losing my job, I've made significantly less money than the previous year, \$4,000 less."

## **WORK BONUS**

"My 2018 taxes included a \$1,000 work bonus that I did not receive the following year."

## **EXTRAORDINARY EXPENSES**

"When I broke my arm I had to get surgery which resulted in \$2,000 out of pocket expenses that the insurance would not cover"

## **SEASONAL JOB**

"Due to lower production levels this year, the company greatly reduced our hours resulting in a lost income of \$\_\_."

\*Seasonal jobs include: agriculture, warehouse, construction, etc.

# CONTACT INFORMATION

GET IN TOUCH WITH FINANCIAL AID



<https://www.skagit.edu/financial-aid/>

## Email Address

financial.aid@skagit.edu

## Mailing Address

2405 E. College Way- Lewis  
121 Mount Vernon, WA  
98273

## Phone Number

Mount Vernon: (360)416-  
7666  
Whidbey Island: (360)679-  
5320

