

Special Circumstances - Dependent Student

2025-26

| Student Name: | Hope College ID Number: |
|---------------|-------------------------|

Your eligibility for financial aid is determined using the information provided on the Free Application for Federal Student Aid (FAFSA). We use the FAFSA data to provide an equitable and consistent review for all students. The 2025-26 FAFSA calculation considers your 2023 income as a good indicator of the financial strength of your family.

We understand that families may experience financial changes that are not reflected on the FAFSA. If your parent/s 2024 or 2025 income is expected to be significantly less than that of 2023, please complete the information listed below and provide all noted supporting documentation.

- Submit a signed copy of parent/s 2023 and 2024 federal income tax return with W-2 forms
- Submit a written explanation of your parents' change in income
- Submit supporting documentation of income estimates

| Projected 2025 Income | Father/Stepfather | Mother/Stepmother | Required Document(s) |
|--|-------------------|-------------------|--------------------------------------|
| Gross Income from Work | \$ | \$ | Current/Final Pay Statement |
| Severance Pay | \$ | \$ | Letter from Employer |
| Unemployment Benefits | \$ | \$ | Documentation from Agency |
| Pension Distributions | \$ | \$ | 1099R or Pension Statement |
| Business Income | \$ | \$ | Quarterly Statement |
| Workman's Comp Benefits | \$ | \$ | Documentation from Agency |
| Taxable Social Security Benefits | \$ | \$ | Documentation from Agency |
| Untaxed Social Security Benefits (including SSI) | \$ | \$ | Documentation from Agency |
| Child Support Received | \$ | \$ | Letter from Court |
| Alimony | \$ | \$ | Letter from Court |
| Early Withdrawal from Retirement Funds | \$ | \$ | Letter outlining how funds were used |
| Non-Education Veterans Benefits | \$ | \$ | Documentation from Agency |
| Other Untaxed Income: | \$ | \$ | Documentation from Source |

Certifications and Signatures

Each person signing below certifies that all of the information reported is complete and correct. The parent whose information was reported on the FAFSA must sign and date. Warning: If you purposely give false or misleading information, you may be fined, sent to prison, or both.

| Parent Signature: | | Date Signed: | |
|-------------------|----------------------------|--------------|--|
| | (signature must be in ink) | | |