

### 2024–2025 Special Conditions Form

The Special Conditions Form can be used if you or your family has experienced an unusual circumstance that may affect your ability to pay for your education at the University of Baltimore. Before the office can take your circumstance into consideration, you must have filed the 2024-2025 Free Application for Federal Financial Aid (FAFSA). The reduction must result from one of the special conditions listed below occurring between January 1, 2024 and December 31, 2025.

This form is designed to adjust the Student Aid Index (SAI) which determines what portion of aid can be need based. Submitting this form does not necessarily mean additional aid will be awarded.

**NOTE**: Graduate and Law/APD students are awarded Unsubsidized Direct Loans only and will not benefit from filing a Special Conditions Form.

Please complete and return this form and any requested documentation to the Office of Financial Aid. Documents may be faxed to 410.837.5493 or scanned and emailed to <a href="mailto:financialaid@ubalt.edu">financialaid@ubalt.edu</a> or uploaded online by visiting our Financial Aid Forms webpage: <a href="http://www.ubalt.edu/admission/financial-aid/resources/forms.cfm">http://www.ubalt.edu/admission/financial-aid/resources/forms.cfm</a>. Please allow 3-5 business days for your To-Do List to be updated once submitted. Please note the review process can take up to three weeks

#### A. STUDENT INFORMATION

Last Name		First Name	M.I.	Student ID Number				
Email Address		Telephone Number		Date of Birth				
В.	SPECIAL CONDITION (Check each category that identifies your special							
	condition. Parent information and a parent signature is required for dependent							
	students only.)							
Ор	otion 1: Loss or reduction of inco	me of at least 20%. Please provide the following:						
A dated letter of resignation or termination								
C								
С	Documentation of benefits from Unemployment Administration showing monthly benefit or denial of benefit, if applicable							
C	) Documentation of severance, if applicable							
C	) A copy of your 2022 & 20 <b>23</b> II	RS Tax Return Transcript						
C	) A copy of your parent or spo	use 2022 & 2023 IRS Tax Return Transcript						
C	) A copy of all 2022 & 20 <b>23</b> W2	Forms						
Ор	otion 2: Death of parent or spous	e. Please provide the following:						
C	A copy of the death certifica	ate						
C	) A copy of your 2022 & 2023 II	RS Tax Return Transcript						
С	A copy of your parent or spo explanation if you are unable	ouse 2022 & 2023 IRS Tax Return Transcript (Please to obtain this information)	provide an					
C	) A copy of all 2022 & 2023 W2	? Forms						
Ор	otion 3: Separation or divorce of	parent (or student). Please provide the following:						

Q	If separated, please provide documentation showing the individuals live in separate residences.								
$\bigcirc$	If divorced, please provide the divorce decree.								
$\bigcirc$	A copy of your 2022 & 20 <b>23</b> IRS Tax Return Transcript								
$\bigcirc$	A copy of your parent or spouse 2021 & 2022 IRS Tax Return Transcript								
$\bigcirc$	A copy of all 2022 & 20 <b>23</b> W2 Forms								
Option 4: Permanent and total disability suffered. Please provide the following:									
$\bigcirc$	A signed letter from a physician stating the extent and duration of the disability								
$\bigcirc$	Documentation showing year-to-date income received (last pay stub if applicable)								
$\bigcirc$	Disability benefit statement from Social Security Administration								
$\bigcirc$	A copy of your 2022 & 2023 IRS Tax Return Transcript								
$\bigcirc$	A copy of your parent or spouse 2022 & 2023 IRS Tax Return Transcript								
$\bigcirc$	A copy of all 2022 & 20 <b>23</b> W2 Forms								
Option 5: Reduction of untaxed income. Please provide the following:									
$\bigcirc$	A copy of supporting documentation showing the reduction								
$\bigcirc$	A copy of your 2022 & 2023 IRS Tax Return Transcript								
$\bigcirc$	A copy of your parent or spouse 2022 & 2023 IRS Tax Return Transcript								
$\bigcirc$	A copy of all 2022 & 20 <b>23</b> W2 Forms								
Opt	Option 6: One time income received that will not be received next year. Please provide the following:								
$\bigcirc$	A copy of supporting documentation showing the one-time occurrence								
$\bigcirc$	A copy of your 2022 & 2023 IRS Tax Return Transcript								
$\bigcirc$	A copy of your parent or spouse 2022 & 2023 IRS Tax Return Transcript								
$\bigcirc$	A copy of all 2022 & 20 <b>23</b> W2 Forms								
_	EXPLANATION OF APPEAL								
	ISE explain your special conditions in detail. How has the situation affected your ability to pay for								
	3-2024 educational expenses?								
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# D. FAMILY INFORMATION (NOTE: Students using parental data on the FAFSA are classified as dependent)

## Dependent Students List the people in your parent's household including:

- Yourself
- Parent(s) (including step-parent) even if you don't live with them
- Your parents' other children, even if they do not live with your parent(s), if (1) your parents will pro-vide more than half of their support from July 1, 2023 through June 30, 2024 or (2) the children would be required to give parental information when applying for Federal Student Aid
- Any other people if they now live with your parents, your parents provide more than half of their support, and will continue to provide more than half of their support from July 1, 2023 through June 30, 2024

### Independent Students List the people in your parent's household including:

- Yourself and your spouse, if married
- Your children, if any, if you will provide more than half
  of their support from July 1, 2023, through June 30,
  2024, or if the child would be required to provide your
  information if they were completing a FAFSA for 2023–
  2024: include children who meet either of these
  standards, even if they do not live with you
- Any other people if they now live with you and you provide more than half of their support and will continue to provide more than half of their support through June 30, 2024

#### **Family Information:**

Full Name	Age	Relationship	Name of College (if enrolled at least half time this year) Do not include your parent's college	Did/Will this person file a 2021 Federal Tax?
1			_	_ Yes O No O
2				_ Yes O No O
3				_ Yes O No O
4				_ Yes O No O
5				_ Yes O No O
6E. SIGN THIS WORKSHEET				_ Yes O No O
By signing this worksheet, I (we aid is complete and correct. If purposely give false or mislean	) certify that all the int you are dependent f	or financial aid pur	ooses, at least one parent r	must sign. <b>Warning: If you</b>
Student Signature:		 Pare	nt Signature:	<u></u>