

STUI	DENT'S NAME
ADD	RESS PHONE
CITY	, STATE, ZIP
	Appeals will NOT be considered until appropriate documentation and this form are submitted to the Financial Aid Office.
SPEC	CIAL CIRCUMSTANCE (check appropriate category)
	One of the student's parents earned money in 2021 or 2022 and is no longer employed. * submit documentation type #1, #2, #4 and #9 (described below)
	One of the student's parents earned money in 2021 or 2022 and has been unable to earn money in his/her usual way now due to a disability, reduction in pay, or a job change. * submit documentation type #1, #2, and #3 (for disability only) (described below)
	One of the student's parents received an untaxed benefit in 2021 or 2022 (such as child support), and has completely lost that income. * submit documentation type #4 (described below)
	The student has already applied for financial aid and his/her parents have divorced or separated since that time. * submit documentation type #1, #2, and #5 (described below)
	The student has already applied for financial aid and a parent has died since that time. * submit documentation type #1, #2, and #6 (described below)
	The parents have paid more than 11% of their total income in non-reimbursed medical expenses in 2021 OR in 2022. *submit documentation type #1 and #7 (described below)

DOCUMENTATION REQUIRED (MUST be submitted)

TYPE #1	TYPE #2	
Signed copies of parents' 2021 & 2022 federal income tax return	Copies of the most recent pay stubs from ALL parent's	
(pages 1 and 2), including Schedules 1, 2, and 3 (if applicable)	employers showing date of that pay period, amount earned that period, and year to date amount earned	
TYPE #3	TYPE #4	
A letter from the physician stating type of disability, date of	A letter from the appropriate public agency stating type of	
diagnosis and anticipated length of recovery time	benefits terminated, date of termination and total amount	
	expected	
TYPE #5	TYPE #6	
A copy of the court order showing date of divorce or separation	A copy of the death certificate or newspaper obituary showing	
and verification of separate addresses	the date of the parent's death	
TYPE #7	TYPE #8	
A copy of the schedule A from the 2021 federal tax transcript if	A copy of unemployment benefits statement (showing benefit	
expenses were paid in 2021 OR copies of receipts showing	amount and benefit start date) if parent is receiving any benefits	
medical and dental expenses actually paid PERSONALLY in 2021	OR denial of benefits statement	
and not reimbursed		
ТҮРЕ #9	OTHER	
Copies of all parent's W2s for 2021 & 2022		

PLEASE EXPLAIN THE NATURE OF YOUR APPEAL AND YOUR LOSS OF INCOME: (Must be completed)

STATEMENT AND CERTIFICATION:

I (we) hereby certify that all information reported on this form is true and correct to the best of my (our) knowledge. If this form is submitted after January 1, 2023, I have attached a signed copy of all 2022 W-2's. I (we) understand the penalty for providing false or misleading information is a \$20,000 fine, a prison sentence, or both.

Student Signature	Date
Father's (Stepfather's) Signature	Date
Mother's (Stepmother's) Signature	Date

PRINT THIS FORM AND SUBMIT WITH REQUIRED DOCUMENTATION TO:

MALONE UNIVERSITY Financial Aid Office 2600 Cleveland Ave. N.W. Canton, OH 44709 Fax 330-471-8652

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