Special Circumstances Form  
2011-2012 Academic Year

Carson-Neuman College

At some point in the financial aid process, you have indicated circumstances that you would like for us to review as we process your financial aid. Follow the steps below and return this form with the appropriate documentation to the address at the end of this form. The information you provide on this form will be reviewed to determine if adjustments to your FAFSA can be made. Please allow 3 to 4 weeks processing time. You will be notified of the decision by the Office of Financial Assistance in writing. All decisions made by the Office of Financial Assistance concerning special circumstances are final. If you have questions, please contact the Office of Financial Assistance at (865) 471-3247.

- File the 2011-2012 FAFSA. For quick results, file online at www.fafsa.ed.gov.
- Complete Section A of this form.
- In Section B, check all boxes which apply to your situation.
- Complete the Income Assessment Form in Section C.
- Student and Parent (if student is dependent) read the certification and sign in Section D.
- Complete and attach the Verification Worksheet found at http://admissions.cn.edu/admissions/finaid/forms.asp
- Return this form with attachments to the Office of Financial Assistance of Carson-Newman College.

Section A - Student Information

Name:_________________________ Student Id: ________________________

Address:____________________________________________________________

City:________________________ State:______ Zip:_______________________

Parent(s) whose information was provided on your FAFSA:

Mother’s (Stepmother’s) Name:_________________________________________

Father’s (Stepfather’s) Name:___________________________________________

Telephone number where you or your parent can be reached in the event of questions:

Student phone number:____________________ Parent Phone Number:__________

List the people in your household, including yourself. List the name of the college for any member (excluding parents) who will attend college at least half-time between 07/01/2011 and 06/30/2012.

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Age</th>
<th>Relationship</th>
<th>College</th>
</tr>
</thead>
<tbody>
<tr>
<td>Self</td>
<td></td>
<td>Self</td>
<td>Carson-Newman College</td>
</tr>
<tr>
<td>Self</td>
<td></td>
<td>Self</td>
<td>Carson-Newman College</td>
</tr>
<tr>
<td>Self</td>
<td></td>
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<td>Carson-Newman College</td>
</tr>
<tr>
<td>Self</td>
<td></td>
<td>Self</td>
<td>Carson-Newman College</td>
</tr>
</tbody>
</table>
Section B - Special Circumstances

From the list provided, indicate the reason for the requested review of your family’s financial situation.

☐ Loss of Job, or Parental Loss of Job

- Separation Notice / Termination Notice or documentation from employer showing effective date of termination.
- Documentation of severance package (if one exists).
- Copy of last paystub received from the terminated employment position.

☐ Loss of Untaxed Income

☐ Loss of Child Support
  - Provide court documentation stating the date of termination of benefits.

☐ Loss of Worker’s Compensation
  - Provide appropriate official documentation.

☐ Other. Please specify and provide appropriate documentation.

☐ Loss of Taxable Income

☐ Loss of Alimony
  - Provide court documentation stating the date of termination of benefits.

☐ Loss of Unemployment Benefits
  - Provide appropriate letter from the unemployment office stating the date of termination of benefits.

☐ Other. Please specify and provide appropriate documentation.

☐ Excessive Medical Expenses

*Payments made out of pocket beyond what your insurance covers within a one year time frame. Do not include insurance premium costs.*

- Provide bills showing the expenses.
- Provide proof of personal payment of the expenses in question (check stubs, receipts, etc)

☐ One time income increase occurrence.
  - Provide complete copies of the 2008 and 2009 signed federal income tax returns.

☐ Other Circumstances.

Please List:_____________________________________________________________________________________________________
_______________________________________________________________________________________________________________
_______________________________________________________________________________________________________________
Section C - Income Assessment Form

Please complete the table below to help us assess your actual income for 2011. Report all income you expect to receive through December 31, 2011, in the appropriate boxes. You must included documentation supporting all income. This documentation could include but is not limited to:

- Recent pay stubs showing year-to-date earnings (since January 1, 2011).
- A letter from your employer stating total 2011 projected and/or actual earnings.
- W-2 Forms

If you are submitting the request for consideration after December 31, 2011, you must submit a copy of your completed 2010 federal income tax return.

### Parent Income and Asset Information (For Dependent students only)

<table>
<thead>
<tr>
<th>Income for 2011 (January 1 to December 31)</th>
<th>Actual 01-01-11 to Today</th>
<th>Estimated Today to 12/31/11</th>
<th>Totals=Actual + Estimated</th>
</tr>
</thead>
<tbody>
<tr>
<td>FATHER: expected income earned from work (wages, salaries, tips, net farm or business)</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>MOTHER: expected income earned from work (wages, salaries, tips, net farm or business)</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other Taxable income: (dividends, interest, pensions, annuities, alimony, unemployment compensation, capital gains) SOURCE:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Social Security benefits</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Child Support received</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other untaxed income: (earned income credits, welfare benefits, workers comp., payments to IRA/Keogh, etc) SOURCE:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Total Parental Income for 2011</strong></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

Please list your current asset information (if any of the following are applicable):

Net Worth means market value of the asset minus debt on the asset

- Current amount of cash, savings, and checking: $________
- Current net worth of real estate/investments (other than home) $________
- Current net worth of farm or business $________

### Student Income and Asset Information

<table>
<thead>
<tr>
<th>Income for 2011 (January 1 to December 31)</th>
<th>Actual 01-01-11 to Today</th>
<th>Estimated Today to 12/31/11</th>
<th>Totals=Actual + Estimated</th>
</tr>
</thead>
<tbody>
<tr>
<td>STUDENT: expected income earned from work (wages, salaries, tips, net farm or business)</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>SPOUSE: expected income earned from work (wages, salaries, tips, net farm or business)</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other Taxable income: (dividends, interest, pensions, annuities, alimony, unemployment compensation, capital gains) SOURCE:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Social Security benefits</td>
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<td>$</td>
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<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other untaxed income: (earned income credits, welfare benefits, workers comp., payments to IRA/Keogh, etc) SOURCE:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Total Student and/or Spouse Income for 2011</strong></td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>
Section C - Cont’d

Please list your current asset information (if any of the following are applicable):

* Net Worth means market value of the asset minus debt on the asset

- Current amount of cash, savings, and checking: $___________
- Current net worth of real estate/investments (other than home) $___________
- Current net worth of farm or business $___________

Section D - Certification and Signature

My signature below certifies that the information I have provided on this form is true. I agree to provide proof of the information if and/or when requested. I understand that the penalty for providing false or misleading information is a $10,000 fine, a prison sentence, or both.

Parent Signature:_________________________________________ Date:___________________

Student Signature:_________________________________________ Date:___________________

Spouse of Student Signature:________________________________ Date:___________________

Appeals will not be reviewed until all information is complete. If additional documentation is requested, please submit as soon as possible. If the information is not received by the deadline indicated at the time of the request, we will assume that you do not wish to pursue the appeal.