

## SPECIAL CONDITION FORM FOR 2023-2024 FOR STUDENT

The purpose of this form is to report reductions in income or special circumstances that were not reported on the original FAFSA filed. The FAFSA must be filed prior to completion of this form.

·	Student's Name
Studen	t's Last Name Student's First Name
docum	Special Condition - Please complete all sections that apply to your situation. You must provide entation to support the condition indicated such as copy of death certificate, proof of unemployment, loss income.
A)	Death of parent/spouse after original application was filed:  Date of death / / / month day year
B)	Parent/ Student has become separated or divorced after submission of FAFSA  Date of separation or divorce / / month day year
C)	Parent/ Student has experienced a reduction in income due to unemployment, illness, or disability and has remained out of work for at least 10 weeks (need not be continuous). Check one:
	Date of employment loss: from / / to / / month day year to month day year
D)	Parent/ Student had a loss or reduction in unemployment compensation or untaxed income for 2022 such as disability payments, untaxed pension distributions, etc.
	Source of Income Value for 2022 Value for 2023
	Date that income/benefit ceased or was reduced:  / / month day year
E)	If none of the conditions listed are applicable to your situation and change in financial status, please provide details below – attach a separate sheet if necessary:

In order to evaluate your need for financial assistance, complete the worksheet below providing estimates of all income you and/ or your parent(s) expect to receive in 2023. If you are separated, divorced, or your spouse is deceased, report expected income for only yourself. **Do Not Leave Blanks**, enter a **zero** for questions that don't apply to you.

Expected 2023 Taxable Income	Student's Income	Parents's Income	
Income			
Wages, salaries tips	\$	_ \$	
Severance pay	\$	\$	
Pensions and annuities	\$	\$	
Interest and dividend income	\$	\$ 	
Business or farm net income	\$	- \$ <u></u>	
Capital gains	\$	- <u>\$</u>	
Income received from rents after expenses paid	·	_	
mortgage interest, taxes, and insurance	\$	\$	
Alimony which will be received	\$	- <u>\$</u>	
Unemployment compensation	Ψ ¢	- Ψ <u></u>	
Any other taxed income	Ψ	_ ψ	
Total 2023 Taxable Income	Φ ¢	_	
Total 2023 Taxable income	Φ	_ Φ	
Expected Untaxed Income and Benefits			
Payments to tax-deferred pension and savings directly or withheld from earnings); include unta			
401(k) and 403(b) plans	\$	\$	
Retirement or disability benefits	\$	\$	
Worker's Compensation	\$	\$	
Welfare benefits including AFDC/ADC or TANF	(excluding		
food stamps)	\$	_ \$	
Untaxed portion of pensions	\$	\$	
Living and housing allowances for clergy, milita		- \$ <u></u>	
(excluding rent subsidies for low-income housir cash payments or cash value of benefits		_	
Child support or maintenance payments which	will be received \$	\$	
Cash support or money paid on student's beha		- \$ <u></u>	
Veterans benefits except student's educational		\$	
Railroad retirement benefits	\$	- <u>\$</u>	
Any other untaxed income and benefits such as		_ Ψ	
Benefits, Refugee Assistance, etc.	\$	_ \$	
Total 2023 Untaxed Income	\$	_ \$	
Expected Child Support You Will Pay in 202	<b>3</b> \$		
Step 3 – Certification All of the information on this form is true provide supporting documentation and understa			
Student's Signature Date		ıse's Signature	 Date
Date Date	r areni/opoc	isc s olyllatule	Date

Return completed form along with a signed copy of your and your spouse's 2022 federal tax return(s), including W-2 form(s) to:

Geisinger Commonwealth School of Medicine Financial Aid Office 525 Pine Street Scranton, PA 18509 Fax (570) 504-2815