



Student Financial Services
Campus Hub
120 Wigley Administration
Mankato, MN 56001
P: 507-389-1866 / F: 507-389-1866



Professional Judgment for Special Circumstances Request 2026-2027

STUDENT NAME _____ TECH ID _____

Special Circumstances are situations beyond an individual's control that affect income reported on the 2026-2027 FAFSA. Below are listed the situations for which adjustments to your financial aid application may be possible.

SECTION A: ***PLEASE INDICATE THE SITUATION(S) THAT APPLY AND SUBMIT WITH DOCUMENTATION ATTACHED***

Your 2026 income has substantially decreased from the 2024 income as result of a loss or change in employment due to extenuating circumstances for a period of 10 weeks or longer during 2026.

Documents required:

- A personal statement explaining your situation and extenuating circumstances.
For your loss of income, complete Section B of Special Circumstance Form.
Letter or document from previous employer on company/organization letterhead indicating dates of employment.
The most recent pay stub indicating year-to-date earnings.
Copies of all 2024 W2's and/or Schedule C's
If unemployed, a copy of the most recent unemployment compensation statement. If you are not receiving unemployment compensation, please address this in your personal statement and provide copy of denial notice.

You had a loss or reduction in an untaxed income or benefit which had been received in 2024.

Documents required:

- A personal statement explaining your situation.
Complete Section B of Special Circumstance Form
Letter or document from the agency/organization from which the benefit was received indicating the last date the benefit was receive or reduced.
Total amount of untaxed income now expected for 2024 Source
Date benefit stopped:

You have divorced or legally separated since the time you applied for Federal Student Aid.

Documents required:

- In the case of divorce, copy of divorce decree.
In the case of separation, a letter from an attorney indicating separation date.
If you filed 2024 taxes jointly, please provide a signed copy of your 2024 Federal Income Tax Returns AND applicable schedules and W-2s.
Complete updated household size form Section C.

Your spouse has passed away since the time you applied for Federal Student Aid.

Documents required:

- Copy of the death certificate or obituary notice.
If 2024 taxes were filed jointly, please provide a signed copy of your 2024 Federal Income Tax Returns AND all applicable schedules and W-2s.

You had excessive medical and dental expenses not covered by insurance.

- To consider expense during the 2024 year, provide a copy of the 2024 IRS Schedule A, or receipts of medical expenses paid by you in 2024.
To consider expenses during the 2026 year, provide a copy of the 2026 Schedule A, or receipts of medical expenses paid by you in 2026

Distribution of 401K or similar, based on financial hardship, that is included in the 2024 adjusted gross income.

Documents required:

- Personal statement detailing situation and how funds were utilized. Indicate if any funds are remaining.
Copy of mortgage/rent documents, utility bills, medical costs, or other expenses that were paid with these funds.
Signed copy of 2024 Income Tax Return and ALL IRS 1099R forms.

Other: Personal Statement and supporting documentation required.



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SECTION B

2026 INCOME PROJECTIONS (for loss of income)

Please provide your most recent paystub for all jobs worked from January 1, 2026 to present. Estimate all expected income from the present until December 31, 2026.

****If submitting this request after the Fall 2026 term has ended, please attach a copy of your 2026 Federal Income Tax Return and W-2's**

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Wages, salaries, tips, and all other taxable income (do not include financial aid, unemployment, or wages earned through work-study).

Name of Individuals	1/1/2026 to present		+	the present to 12/31/2026	=	2026 taxable total
Student _____	\$ _____		+	\$ _____	=	\$ _____
Spouse _____	\$ _____		+	\$ _____	=	\$ _____

Untaxed income (child support, payments to tax-deferred pension and savings plans, untaxed portions of IRA distributions, worker's compensation, other untaxed income). **PLEASE SPECIFY AND LIST YEARLY ESTIMATED TOTAL:** _____

SECTION C (only if you have become divorced or separated)

Please list your household members referenced in Section A, be sure to INCLUDE YOURSELF below.

Name	Birth Date	Relationship to Student	College Attending 2026-2027
<i>John Smith (example)</i>	<i>12/31/9999</i>	<i>Self</i>	<i>Central University</i>
1.		Self	
2.			
3.			
4.			
5.			
6.			
7.			
8.			

The information and projections are true to the best of my/our knowledge. I/we understand that no adjustments will be made to the financial aid application without the appropriate supporting documentation.

STUDENT SIGNATURE _____

DATE _____

Return by Mail To:

Campus Hub
Minnesota State University, Mankato
 120 Wigley Administration
 Mankato, MN 56001

OR

Drop off at the Campus Hub
 117 Centennial Student Union
 Fax: 507-389-1866

Upload the completed signed form and all supporting documentation to: <https://link.mnsu.edu/upload>

A member of the Minnesota State Colleges and Universities System.

Minnesota State Mankato is an Affirmative Action/Equal Opportunity University. This document is available in alternative format to individuals with disabilities by calling the Campus Hub at 507-389-1866, 800-627-3529 or 711 (MRS/TTY).