



Office of Financial Aid

2021-2022 Change of Circumstances Form

The purpose of the Change of Circumstances Form (CCF) is to collect information on expected 2021 income and unreimbursed medical expenses so that we may recalculate your eligibility for financial aid for the 2021-2022 academic year. You may wish to complete the CCF if it is apparent to you that the income from 2019 (the year on which the FAFSA information is based) was substantially more than what will be received in 2021. You are welcome to complete and return the CCF to our office as soon as you feel you can provide a realistic estimate of your total 2021 information. Please be sure that you are considering all potential sources of income, including unemployment benefits, when determining your estimate.

Please submit this form by mailing or faxing it to the address or fax number listed at the bottom of each page. If you prefer to submit the CCF electronically, please use our [secure file upload system](#). We will then review the completed CCF, recalculate your eligibility for financial aid if appropriate, and inform you of the results. **There is no guarantee that your circumstances will warrant a recalculation or that any additional aid will be available to you if we do a recalculation.**

If your CCF demonstrates the need for additional aid, we will respond to you as quickly as possible with an amount by which we can increase your aid, but we need to set realistic expectations. Depending on the amount of the projected loss of income, a student might expect to receive anywhere from an additional \$1,000 to \$2,500 from Messiah University. It is also possible that the student could become eligible for additional federal financial aid as a result of this adjustment.

In early 2022, we will ask you to submit documentation to confirm your actual income. At that point, if appropriate, we will re-adjust additional aid amounts which **could mean that we take back some of the additional aid that was offered**. Please be assured that our goal will be to not reduce the additional award amounts unless there is an extreme mismatch between the estimate and the final outcome.

We also want to let you know that the CCF is not for the purpose of providing information on unusual expenses (except unreimbursed medical), including those brought about by the COVID-19 pandemic. Expenses related to the COVID-19 pandemic should be reported [here](#), and other unusual expenses or financial situations of which you wish to make us aware should be reported via a letter signed by both the student and one parent. This letter should provide specific dollar amounts and dates regarding the situation you are reporting.

Please also note that we normally will not remove windfall (one time) income received in 2019 from the calculation that determines your financial aid eligibility. Nor will we process a second CCF if we processed a CCF for you in a previous year and you are now filing a second CCF which would cause us to ignore income that exceeded your estimate from the last form that you filed.



Office of Financial Aid

2021-2022 Change of Circumstances Form

Section A

Student's Name _____ Student School ID# _____

Street _____

City _____ State _____ Zip _____

Section B

In the first column, check only the item that describes your circumstances and complete that section. Most people will complete item number 3, which requires you to provide a complete explanation of the specific details regarding your change. Attach any applicable documentation.

	Dependent Student	Independent Student
1. _____ Separated or Divorced	<p>The student has already applied for Federal Student Aid for 2021-2022, but his or her parents have separated or divorced since that time.</p> <p>Which parent are you living with?</p> <p>_____</p> <p>Write in the date your parents got separated or divorced.</p> <p style="text-align: center;"> ____ / ____ / ____ MM DD YR </p> <p>Please complete the enclosed Messiah University Family Size Clarification form.</p>	<p>The student has already applied for Federal Student Aid for 2021-2022, but has separated or divorced since that time.</p> <p>Write in the date you got separated or divorced.</p> <p style="text-align: center;"> ____ / ____ / ____ MM DD YR </p> <p>Please complete the enclosed Messiah University Family Size Clarification form.</p>

MESSIAH UNIVERSITY FAMILY SIZE CLARIFICATION
 (Only complete this page if you checked item 1 or 2 in section B)

2021-2022 Academic Year

The purpose of this form is to verify your family size, number in college and additional financial information. Remember, to be included in the number in college, a person must be attending at least half-time and parents CANNOT be counted as family members attending college. Please complete and return this form to the Financial Aid Office by US Mail or FAX. For questions, call 717.691.6007.

Dependent Student: Fill in the information about the people that your parents will *support* between July 1, 2021 and June 30, 2022. Include your parents and yourself. Include your parents' other children if they receive more than half their *support* from your parents OR if they would be required to provide parental information if they were completing a FAFSA for 2021-2022. Include other people only if they now live with and receive more than half of their *support* from your parents.

Independent Student: Fill in the information about the people that you will *support* between July 1, 2021 and June 30, 2022. Include yourself and your spouse. Include your children if they receive more than half their *support* from you. Include others only if they meet the following criteria: 1) they now live with you **AND** 2) they now receive more than half their *support* from you. (*Support includes money, gifts, loans, housing, food, clothes, car, medical and dental care, payment of college costs, etc.*)

To list a college in the "College Attending" column, other family members must be enrolled (or accepted for enrollment) at least half-time, working toward a degree or certificate at a college eligible to participate in Federal student aid programs. Always include yourself (the student) in the number in college, even if you will be enrolled less than half-time. DO NOT INCLUDE parents' college attendance.

<u>Full Name</u>	<u>Age</u>	<u>Relationship</u>	<u>College Attending 2021-2022</u>
		You, the student	Messiah University

Section C - Estimated Income and Asset Information for the Entire Calendar Year 2021

Please enter **estimated TOTAL 2021 calendar year income information below**. Complete either or both the parents' or student's information (whichever applies to your situation). Make your best estimate even if you are uncertain of the accuracy. **Enter 0's if the answer is "none." Do NOT leave items blank.** Also, DO NOT complete the asset section unless instructed to do so. If income is less than \$20,000, attach an explanation of how family expenses will be met.

2021 Estimated Earned Income	Parent(s)	Student (& Spouse)
Adjusted Gross Income (include taxable earnings, unemployment/severance and social security benefits).....	\$ _____	\$ _____
Standard or Itemized Deductions.....	\$ _____	\$ _____
Child tax credit/credit for other dependents.....	\$ _____	\$ _____
Income earned from work by Father/Student.....	\$ _____	\$ _____
Income earned from work by Mother/Spouse.....	\$ _____	\$ _____
2021 Additional Financial Information		
Child support paid because of divorce or separation or as a result of a legal requirement.....	\$ _____	\$ _____
Taxable earnings from Federal Work-Study	\$ _____	\$ _____
Taxable student grant and scholarship aid reported to the IRS in your adjusted gross income.....	\$ _____	\$ _____
Taxable combat pay or special combat pay.....	\$ _____	\$ _____
Earnings from work under coop. education program.....	\$ _____	\$ _____
2021 Untaxed Income		
Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings).....	\$ _____	\$ _____
IRA deductions and payments to self-employed SEP, SIMPLE, Keogh and other qualified plans.....	\$ _____	\$ _____
Child support received for all children. Don't include foster care or adoption payments.....	\$ _____	\$ _____
Tax-exempt interest income.....	\$ _____	\$ _____
Untaxed portions of IRA distributions, exclude rollovers. If negative, enter 0.....	\$ _____	\$ _____
Untaxed portions of pensions, exclude rollovers. If negative, enter 0.....	\$ _____	\$ _____
Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits).....	\$ _____	\$ _____
Veterans noneducation benefits, such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.....	\$ _____	\$ _____
Other untaxed income and benefits not reported, such as workers' comp., disability, health savings accounts, etc.....	\$ _____	\$ _____
Money you will receive, or will be paid on your behalf (e.g., bills), not reported elsewhere on this form.....	XXXXXXXXXXXX	\$ _____

Medical/Dental Expenses	Parent(s)	Student (& Spouse)
If you listed medical/dental expenses not paid by insurance as the reason for this form, list total here.....	\$ _____	\$ _____
	.00	.00

**STOP: Is projected income equal to or more than 2019 income reported on FAFSA?
If so, do NOT submit this form to the Financial Aid Office.**

Assets - Do not complete this section unless checked here _____

Total balance of cash, savings, and checking accounts.....	\$ _____	\$ _____
Net worth of investments and other real estate.....	\$ _____	\$ _____
Net worth of current business and/or investment farms.....	\$ _____	\$ _____
	.00	.00

Section D - Statement of Certification and Authorization:

In addition to the student, one parent (if student is dependent) must sign the appropriate space(s) below. If the student is independent, the spouse's signature is optional.

All the information on this form is true and complete to the best of my (our) knowledge. If asked by an authorized official, I (we) agree to give proof of the information that I (we) have given on this form. I (we) realize that this proof may include a copy of my (our) 2021 U.S. Income Tax Return. I (We) also realize that if I (we) do not give proof when asked; the student may not get aid. I (we) understand that if my (our) estimated 2021 income on this form is significantly less than what I (we) actually receive in 2021; the student's aid might be reduced in the 2021-2022 academic year.

_____ Student's Signature	_____ Date	_____ Spouse's Signature (If student is independent)	_____ Date
_____ Father's Signature	_____ Date	_____ Mother's Signature	_____ Date



**DO NOT WRITE IN THIS SECTION
FINANCIAL AID OFFICE USE ONLY**

1. Current EFC (if selected for verification – check to see if completed) _____
2. Print previous data (from RNANA22 Income and Assets tab) _____
3. Go to RNANA22 Information Release tab – Professional Judgment Used: 1=Yes _____
4. Check medical/dental expenses for more than 11% of IPA (RNINAIQ) _____
5. Recalculated *Income Taxes Paid* amount _____
6. Recalculated EFC (go to Options, to Calculate Need) _____
7. Lock Current record (Y) under Demographic tab _____
8. Check for new awards and changes in existing financial aid _____
9. Make note on SPACMNT about changes to EFC and aid _____
10. Corrections to FAFSA will be sent to CPS and revised award letters will be produced.

Comments:

FAO Signature _____ Date _____