University of Maryland Eastern Shore  
Office of Student Financial Aid
SDC Bldg., Suite 1100  
Princess Anne, MD 21853

2022-2023 Special Condition Application

Student’s Name: ____________________  UMES ID#: __________

Complete this form if there is a change in your family’s circumstances resulting in a significant decrease in income.

Instructions:

1.) Select the calendar year in which the change occurred: ___ 2019 ___2020 ___2021
2.) Select the category in the chart below that represents the change in your family’s circumstances
3.) Attach the required documentation for your chosen category.
4.) If the student, spouse, or parent filed a 2020 Federal Tax Return, attach a copy of all 2020 IRS Tax Return Transcripts or a Signed paper copy of all Federal Tax Returns (handwritten documents are not acceptable) and W-2 Form(s).
5.) Attach a separate page to describe any additional information regarding your family’s circumstances.

<table>
<thead>
<tr>
<th>Circumstance (Only Check One)</th>
<th>Reasons</th>
<th>Required Documentation</th>
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</thead>
</table>
| ___ Loss of Employment | • Termination/Layoff from Job  
• Significant Reduction in Weekly Work Hours  
• Retirement  
• Return to School | • Termination notice or resignation acknowledgement from employer  
• Last pay stub with year-to-date earnings  
• Benefits statement from Unemployment Office, Social Security Administration, or Pension Agency  
• Severance pay notice |
| ___ Loss of Taxable or Untaxed Income | Includes but is not limited to child support, alimony, disability, workers compensation | • Documentation of benefits termination with date of change from provider |
| ___ Divorce or Separation | Parent (or student’s spouse if independent) no longer resides in the household due to divorce or separation after the 2022-2023 FAFSA was filed | • Copy of divorce decree or legal separation agreement  
• Proof of separate residences (e.g., lease, utility bill, driver’s license) if decree or agreement is not available  
• Separation Date (MM/CCYY): _______  
• Child Support and/or Alimony received: amount, frequency (weekly/monthly), and date payments began |
| ___ Death of Parent or Spouse | Parent or student’s spouse (if independent) passed away after the 2022-2023 FAFSA was filed | • Copy of Death Certificate  
• Life Insurance Proceeds |
| ___ Disability | Student, parent or student’s spouse (if independent) suffered total and permanent disability after 2021 | • Physician signed letter regarding disability length  
• Last Pay stub with year-to-date earnings  
• Monthly disability statement from the SSA |

Certification (Sign in ink)

I/we certify that the information reported on this form to the UMES Office of Student Financial aid is true, correct, and complete. The documentation to support the change in family circumstances indicated above is attached.

____________________________________  ___________________________  
Student’s Signature  Date

____________________________________  ___________________________  
Parent’s Signature*  Date

(*required for Dependent students)