

**Special Conditions 2018-2019
Dependent Students**

Name: _____ SSN: _____ SID: _____

Phone Number: _____ Best Times for Appointments: _____

1. On page 2 of this form, report all income you and your parents actually received from Jan. 1, 2017 to Dec. 31, 2017.

2. Attach the following documents:

Copy of you and your parent(s)' 2017 income tax returns.

If special conditions are because of death of parent or because of divorce, please attach a copy of county death certificate or court divorce decree.

Are you or your parents considered a dislocated worker? ___Yes ___No

3. Please write an explanation of your special conditions below. If you or your parent(s) are currently unemployed, please include the date last worked, and the reason that you are no longer employed.

Student's Signature

Date

Parent's Signature

Date

Staff Use Only

Approved Denied Signature: _____ Date: _____

Explanation: _____



