

## 2026-27 Special Conditions Form for Parents of Dependent Students

Complete this form to notify the Financial Aid Office if you have special circumstances that are not reflected on your dependent's FAFSA. We will review your situation on an individual basis to determine if a professional judgement is warranted. The Higher Education Act allows financial aid administrators to consider special conditions on a case-by-case basis for parents with extenuating circumstances. Do not complete this form if the FAFSA SAI is -1500.

Residents of Pennsylvania should contact PHEAA at 1-800-692-7392 concerning PA State Grant. Special Conditions forms reviewed by the Financial Aid Office do not impact state grant eligibility.

Submission of this form does not guarantee additional financial aid. If you have questions, please contact the Financial Aid Office at 412-578-6389 or [finaid@carlow.edu](mailto:finaid@carlow.edu).

Student's Name \_\_\_\_\_

Student ID \_\_\_\_\_

### Section 1

Indicate the applicable reason(s) for the request and follow the corresponding instructions.

<input checked="" type="checkbox"/>	Reason	Instructions
	<b>Actual 2025 income is less than 2024 income reported on FAFSA</b>	Complete section 4 and attach signed copy of 2025 tax return AND W-2 form(s).
	<b>Anticipated 2026 income is less than 2024 income</b>	Complete sections 2, 3, 4 and attach documentation from employer, copy of most recent pay stub, unemployment benefits statement if applicable, and any other pertinent documentation.
	<b>Loss of one-time income</b>	Complete sections 3 & 4 and attach pertinent documentation.
	<b>Unusually high medical expenses</b>	Complete sections 3 & 4 and attach documentation including signed copy of applicable tax return with all schedules.
	<b>Divorce/separation after 2026-27 FAFSA was filed</b>	Complete sections 3 & 4 and attach divorce decree or documentation to verify separate addresses AND signed copy of 2024 tax return and W-2 forms.
	<b>Death of parent after 2026-27 FAFSA was filed</b>	Complete sections 3 & 4 and attach copy of death certificate AND signed copy of 2024 tax return and W-2 forms.

## Section 2

Report all actual/anticipated taxable and nontaxable 2026 income (from January 1, 2026-December 31, 2026). **Do not leave any item blank.** Indicate \$0 when applicable.

Actual/Anticipated 2026 Income	Parent/Stepparent 1	Parent/Stepparent 2
Wages, salaries, tips, severance	\$	\$
Income from businesses (self-employment)	\$	\$
Other income <i>Please specify:</i>	\$	\$
Non-taxable income <i>Please specify:</i>	\$	\$
Total Projected 2026 Income	\$	\$

## Section 3

Attach a separate statement detailing your circumstances and providing any pertinent information that will help us better understand your situation. Make sure your statement is signed once completed and please include parent contact information in case there are questions or additional information is needed. This application will not be reviewed until the statement is submitted.

## Section 4

We understand that if we purposely give false or misleading information on this form or in our supporting documentation, we will be committing a federal crime and could be fined, sent to prison, or both.

\_\_\_\_\_  
Student's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature

\_\_\_\_\_  
Date

Scan and email this form and required documents to [finaid@carlow.edu](mailto:finaid@carlow.edu), upload to your Self-Service record, or mail to Carlow University, Financial Aid Office, 3333 Fifth Avenue, Pittsburgh, PA 15213.