



Office of Financial Aid  
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## 2024-25 Petition for Special Circumstances

My and/or my contributor's financial situation has changed substantially during the past year or since completing the 2024-25 Free Application for Federal Student Aid (FAFSA). This request is to have my federal aid reevaluated, if applicable.

### A. STUDENT INFORMATION (Please Print)

First Name: \_\_\_\_\_ Last Name: \_\_\_\_\_

Maritime ID#: \_\_\_\_\_ Telephone #: \_\_\_\_\_

### B. SPECIAL CIRCUMSTANCE

Please check the box that best meets your circumstance and the person (or people) for whom the change is requested. You must submit the required documentation along with this completed form, including a detailed statement describing the significant change.

Special Circumstance(s)	Required Documentation
<input type="checkbox"/> Receiving/Received Unemployment Benefits <input type="checkbox"/> Parent(s) <input type="checkbox"/> Spouse <input type="checkbox"/> Student	<ul style="list-style-type: none"><li>Unemployment Benefits received up to date (payment history attached) and last date of payment.</li></ul>
<input type="checkbox"/> No Longer Employed <input type="checkbox"/> Parent(s) <input type="checkbox"/> Spouse <input type="checkbox"/> Student	<ul style="list-style-type: none"><li>Statement from previous employer indicating last date of employment and amount of benefits to be paid out</li><li>Last paystub from all employers showing year-to-date earnings</li><li>Termination notice from employer or letter of resignation</li><li>Approval/Denial of Unemployment Benefits</li></ul>
<input type="checkbox"/> Reduction of Income <input type="checkbox"/> Parent(s) <input type="checkbox"/> Spouse <input type="checkbox"/> Student	<ul style="list-style-type: none"><li>Copy of current year's tax return(s)</li><li>Last paystub from all employers showing year-to-date earnings</li><li>Termination notice from employer and amount of benefits to be paid out</li><li>If a new employer – statement of new employer indicating start date and pay rate</li></ul>
<input type="checkbox"/> Private School Tuition <input type="checkbox"/> Parent(s) <input type="checkbox"/> Student	<ul style="list-style-type: none"><li>Signed statement from school indicating net tuition paid (less scholarships or discounts applied) along with child's name attending that school</li><li>School's bill/statement</li><li>Receipts of payments made from September through June</li></ul>
<input type="checkbox"/> Separation or Divorce <input type="checkbox"/> Parent(s) <input type="checkbox"/> Student	<ul style="list-style-type: none"><li>Copy of court-filed legal separation document or divorce decree</li><li>Proof of separate residences (utility bill)</li><li>Notarized letter may be required</li></ul>
<input type="checkbox"/> Death of Parent or Spouse <input type="checkbox"/> Parent(s) <input type="checkbox"/> Spouse	<ul style="list-style-type: none"><li>Death Certificate</li><li>2022 Federal Tax Transcript &amp; 1099-R</li><li>2022 W-2 for each tax filer</li><li>Death benefits and/or insurance payment</li></ul>
<input type="checkbox"/> Pension or Retirement Investment Roll-Over <input type="checkbox"/> Parent(s) <input type="checkbox"/> Spouse <input type="checkbox"/> Student	<ul style="list-style-type: none"><li>2022 Federal Tax Transcript &amp; 1099-R</li></ul>

### C. CERTIFICATION

I/we understand that additional documentation may be required and each person signing certifies that all information reported on this form is complete and accurate. I realize my petition will not be considered until all documentation is provided. I understand that the penalty for providing false or misleading information is a fine, imprisonment, or both.

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's Signature (For dependents students only)

\_\_\_\_\_  
Date