SHENANDOAH® UNIVERSITY
Financial Aid

2026-2027 Unusual Circumstances Form

Student ID: _____

Your 2025-2026 FAFSA indicates that you have unusual circumstances preventing you from providing their information to our office. Please fill out this form and indicate why you have been unable to provide this information below so we can determine how to proceed with your financial aid. Please note that for any unusual circumstances, we will request documentation to support your case for the Department of Education.

☐ **I cannot contact either of my parents (i.e. do not know where they are, no phone number or address for them, etc.)**. Please explain below why you cannot contact your parents and how long you have been out-of-contact. *(If you need more space, please attach a page with your name and SU ID number at the top)*:

_____

_____

_____

_____

☐ **It is unsafe for me to contact either of my parents.** Please explain below, briefly, why it is unsafe for you to contact either of your parents *(if you need more space, please attach a page with your name and SU ID number at the top)*:

_____

_____

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☐ **One or both of my parents has passed away**. Please explain below which parent (or both) has passed, the date of their passing, and if necessary, why you cannot have your other parent fill out the FAFSA. *(If you need more space, please attach a page with your name and SU ID number at the top)*:

_____

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☐ **One or both of my parents is incarcerated.** Please explain below which parent (or both) is incarcerated, the date they were incarcerated, and if necessary, why you cannot have your other parent fill out the FAFSA. *(if you need more space, please attach a page with your name and SU ID number at the top)*:

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☐ **My parents are unwilling to provide their information on the FAFSA**.

- I understand that this means that I can only qualify for the Unsubsidized Stafford Loan as federal aid, will not be able to be considered for Shenandoah Need-Based scholarships, and would like to request the Unsubsidized Loan for the 2026-2027 year waiving my rights to this other aid. _____ *(initial)*
- You will need to provide a signed statement from your parents or other third party supporting that they will not provide financial support for you.

☐ **Other - my unusual circumstance is not listed.** Please explain below your circumstance. *(If you need more space, please attach a page with your name and SU ID number at the top)*:

_____

_____

I understand that I will need to provide documentation to support my circumstances and that providing false or misleading information to the Office of Financial Aid can result in the loss of financial aid, fines, jail time, or all three.

_____

Print Name

_____ _____

Student Signature Date