

**COMPLETING AND SUBMITTING THIS FORM**

Documents **MAY ONLY** be submitted via U.S. Mail, FAX, or Secure Document Upload. To upload documents: Login to Ferris360; search for “Secure Document Upload” icon. **EMAILED DOCUMENTS ARE NOT SECURE AND WILL NOT BE ACCEPTED.**

**FSU Office of Scholarships & Financial Aid**  
 1201 S. State Street, CSS 101, Big Rapids, MI 49307  
 Phone: 231.591.2110; FAX: 231.591.2950  
[finaid@ferris.edu](mailto:finaid@ferris.edu)

**Kendall College of Art & Design**  
 17 Fountain Street NW, Grand Rapids, MI 49503  
 Phone: 616.451.2787; FAX: 616.831.9689  
[kcadfinaid@ferris.edu](mailto:kcadfinaid@ferris.edu)

**SECTION 1: CONTACT INFORMATION**

Student Last Name	First Name	M.I.	Student ID #
Parent Last Name	Parent First Name	M.I.	Parent Phone Number

**STEP 1:**

Complete and submit the 2026-2027 Independent Verification form and provide 2024 tax documentation as listed in the tax documentation section of that form. If you consented to the transfer of tax information when you completed the FAFSA, it is typically not necessary to provide additional tax documentation. However, occasionally we are required to request additional tax documentation requirements. Please check Ferris 360 periodically for any missing financial aid requirements. The Office of Scholarships and Financial Aid will not review your special circumstances request until all requirements have been appropriately submitted.

**STEP 2:**

Complete and submit this Special Circumstances Form, along with a signed, detailed letter, on a separate sheet of paper, from you explaining the reason for this request. The statement must include the date(s) that the change(s) occurred, and if applicable, documentation of the change, such as a death certificate, divorce decree, job termination letter, etc. Please provide documentation that supports the change of income, as well as all **current** sources of income, including social security benefits, unemployment benefits, wages, disability or worker’s compensation benefits, or any other current sources of income that all contributors you and spouse, if applicable, are receiving to support your household. The Office of Scholarships and Financial Aid will not approve your special circumstances request without sufficient evidence of a change of household income.

By signing this form, I certify that all of the above information is complete and correct. The student must sign this form in ink. **ELECTRONIC OR TYPED SIGNATURES WILL NOT BE ACCEPTED.**

Student Signature	Date