



Florida State
 University
 Office of Financial Aid

Name _____

Empl ID _____

Student Phone _____

**2019/2020 SPECIAL CIRCUMSTANCE
 DEATH OF PARENT/SPOUSE (FASPDE)**

*Approved Special Circumstances do not guarantee any additional aid will be awarded.
 Excluding peak periods, the estimated timeframe for a review is 6 to 8 weeks.*

This application is used when there has been a death of one of the parents or spouse listed on the initial FAFSA filed.

Please complete the following information.

Name of Deceased _____

Relationship to student _____

Date of Death _____

Required documentation to be attached to this application when submitted for consideration:

- Copy of Death Certificate
- Copy of all 2017 W-2 Forms for surviving parent/student
 - If parent did not earn income for the specific tax year, provide all of your spouse income, and submit a statement indicating you earned zero income for the tax year in question.
- Copy of SSA 1099 Form if social security benefits were being received.
- Copy of 2017 Tax Return Transcript

I/We certify that the information listed above is correct to the best of my/our knowledge.

 Student Signature

 Date

 Parent Signature

 Date