



2023-24 Petition for Special Circumstances

Student Name: _____ UH ID: _____

Phone Number: _____ Date of Birth: _____

If the financial information that you provided on your Free Application for Federal Student Aid (FAFSA) does not reflect your/your family's current financial situation due to extenuating circumstances, this petition may allow the Financial Aid Office to update your FAFSA. Special Circumstances requests cannot be approved after the applicable semester has ended. We recommend submitting your request no later than 30 days before the end of the semester to ensure there is enough time for review.

Step 1 - Check who the special circumstance in this petition applies to:

Myself

My Spouse

My Parent(s)-A parent signature is required on this form if you are requesting a change to parental information.

Step 2 - Attach a detailed statement to explain the changes to your financial circumstances. Make sure to include dates and an explanation of the income you currently have to support yourself during the 2023-24 school year.

Step 3 - Check the reason for your petition below. Submit documentation to support your petition. Examples of supporting documentation is provided for each type of extenuating circumstance.

	What is your circumstance petition for:	Examples of documentation to attach to this petition
	Unemployment	Unemployment Insurance Determination of Insured Status Letter OR Online Unemployment Insurance Summary of Claims
	Reduction of employment hours/wages	At least 1 full month of the most recent income documentation
	Divorce or Separation	Legal documentation showing divorce or separation AND W-2's for both parties
	Death of spouse or parent	Death certificate or obituary AND W-2's for the deceased party
	Change in household size	Pregnancy, custody, or adoption paperwork, etc.
	Change in number in college	Acceptance letter, class schedule, etc. (must be enrolled at least half-time)
	Other circumstances	Any documents that support circumstances

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

RETURN THIS FORM ALONG WITH ANY OTHER REQUIRED DOCUMENTATION TO THE COMMUNITY COLLEGE CAMPUS THAT YOU WILL BE ATTENDING:

Community College	Address	Email	Phone
Hawai'i Community College	1175 Manono Street * Hilo, HI 96720	hawccfao@hawaii.edu	(808) 934-2712
Honolulu Community College	874 Dillingham Boulevard * Honolulu, HI 96817	honccfao@hawaii.edu	(808) 845-9116
Kapi'olani Community College	4303 Diamond Head Road * Honolulu, HI 96816	kapfao@hawaii.edu	(808) 734-9537
Kaua'i Community College	3-1901 Kaumuali'i Highway * Lihu'e, HI 96766	kauccfao@hawaii.edu	(808) 245-8360
Leeward Community College	96-045 Ala 'Ike Street * Pearl City, HI 96782	lccfao@hawaii.edu	(808) 455-0606
University of Hawai'i Maui College	310 West Ka'ahumanu Ave * Kahului, HI 96732	mauifa@hawaii.edu	(808) 984-3277
Windward Community College	45-720 Kea'ahala Road * Kane'ohe, HI 96744	wcctao@hawaii.edu	(808) 235-7449