



North Central College  
**Office of Financial Aid**  
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## 2019-20 Change in Financial Circumstances—Death of a Parent

**Student Name:** \_\_\_\_\_ **Student ID/SSN:** \_\_\_\_\_

We were recently informed that your family has experienced a major change in financial situation due to a death in the family since filing the **2019-20 Free Application for Federal Student Aid (FAFSA)**. To determine if any adjustments can be made to your financial aid file, please complete all information below **AND** submit all requested documentation.

**A. Death of a Parent:** Since applying for aid, your family has experienced a death or a joint tax return was filed for a family member who is now deceased.

- Date of death: \_\_\_\_\_
- New household size: \_\_\_\_\_
- New number of family member's in college: \_\_\_\_\_
- Will the family be receiving any death benefits (life insurance/pension settlement)? \_\_\_\_\_
- Amount of insurance/death benefits to be received in **2019**: \_\_\_\_\_

### Documentation Requirements:

- Submit copies of **death certificate**.
- Provide supporting documentation of other benefits received: *life insurance payouts, death benefits, etc.*

Briefly summarize your situation here: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

### **IF NOT ALREADY ON FILE, please submit the following documents to the Office of Financial Aid:**

- \* Please complete the IRS Data Retrieval on FAFSA or submit an official IRS **2017** Tax Transcript
- \* **2019-20** Institutional Verification Form: <http://northcentralcollege.edu/financial-aid/forms>
- \* Copies of **2017** W-2's from parent
- \* Copies of **2017** W-2's for student
- \* Signed copy of parent federal **2017** tax return

*I declare that the information reported on this form is true, correct, and complete. I agree to provide, if requested, any other official documentation necessary to verify information reported.*

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date