

**PATRICK & HENRY COMMUNITY COLLEGE
FINANCIAL AID OFFICE
645 PATRIOT AVE
MARTINSVILLE VA 24112
2024-2025 SPECIAL CONDITION FORM**

Student Name: _____ Student ID: _____

CHANGE OF EMPLOYMENT STATUS AND EMPLOYMENT HISTORY

____ Student ____ Spouse ____ Mother ____ Father

____ Employment Ended ____ Disability ____ Full-time to Part-time

Receiving Unemployment Benefits for 2023: ____ Yes ____ No

Last Place of Employment: _____

Hire Date _____

Date Last Employed _____

2024 INCOME INFORMATION

	Student	Spouse	Mother	Father
Wages Earned from Work	\$ _____	\$ _____	\$ _____	\$ _____
Social Security Benefits:	\$ _____	\$ _____	\$ _____	\$ _____
Unemployment	\$ _____	\$ _____	\$ _____	\$ _____
Other Income (Child support, TNAF, AFDC, etc)	\$ _____	\$ _____	\$ _____	\$ _____
Total 2024 Income	\$ _____	\$ _____	\$ _____	\$ _____

- Please explain any other unusual circumstances that may affect your financial situation on the back of this form or on an additional sheet of paper and attach.
- Please attach a copy of the last check stub for the individual(s) who has had a change of employment status, if they were employed during the 2024 year, as well as verification of any other income received in 2024 (example: unemployment benefits, social security benefits, etc.) In addition, please include a copy of your 2022 federal & state taxes along with all schedules, and a copy of your 2023 state & federal taxes along with all schedules.

(FOR PARENT(S)/STUDENT & SPOUSE)

- All of the information reported on this form is true and correct to the best of my knowledge. I understand that any false information given may result in an overpayment on my behalf of which I will be responsible for repaying.

Student's Signature _____ ID # _____

Spouse's/Parent's Signature _____ Date _____

Office Use Only: Approved _____ Denied _____

Financial Aid Coordinator's Signature _____ Date _____

05/10/2024