



Office of Financial Aid  
 323 Erie Street, P.O. Box 5015, Port Huron, Michigan 48061-5015  
 810-989-5530 fax 810-989-5774 [sc4.edu](http://sc4.edu)

**Request for Additional Financial Assistance due to Unusual Circumstances**

*(This form is to be used for additional funds, not for special circumstance requiring corrections to the FAFSA form)*

<b>Semester</b>	<b>Today's Date</b>	<b>Program of Study</b>
Student Last Name	Student First Name	Student ID #
Student Address		Phone #
		Email

**Description of Unusual Circumstance:**

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**Itemization of costs:**

Total cost of tuition & fees	\$
Total cost of books	\$
Total cost of miscellaneous fees	\$
(Less) Other Financial Aid	\$
(Less) Payment from student	\$

**Amount of Funds Requested** \$

*Office Use Only*

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Approved \_\_\_\_\_ Award Amt \$ \_\_\_\_\_ Award Code/Name \_\_\_\_\_  
 Award Amt \$ \_\_\_\_\_ Award Code/Name \_\_\_\_\_  
**Total Award \$** \_\_\_\_\_

Denied \_\_\_\_\_ Reason \_\_\_\_\_