



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

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)

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

Description of Unusual Circumstance:

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

Approved _____ Award Amt \$ _____ Award Code/Name _____
 Award Amt \$ _____ Award Code/Name _____
Total Award \$ _____

Denied _____ Reason _____