



2026-27 Special Circumstances Appeal Form

Name _____ Student ID/SS# _____

Eligibility for 2026-2027 financial aid is determined by many factors, including 2024 income. However, certain life events sometimes deem it more appropriate to use your current and projected income to determine your eligibility for federal aid. This form may be used to report **involuntary, permanent** income changes, unusual expenses, or changes in financial circumstances expected for the 2026 calendar year. The information provided on this form as well as other requested documentation will be used to consider changes in your family’s financial status. The Office of Financial Aid will use that information to evaluate your 2026 projected income to determine if allowable adjustments could or should be made that present a more realistic picture of your family’s ability to contribute toward the cost of a college education. Typically, a 20% or more reduction in total family income may cause a change in eligibility.

You (and your parents, if dependent) must provide all required/requested documentation. **For appeals submitted during or after November/December 2026, the 2026 IRS Federal Tax Return(s) and W-2 Forms are also required.**

Please check the box next to the situation that applies to your family.

Special Circumstance	Required Documents
<input type="checkbox"/> Divorce or Separation (Student or Parent)	<ul style="list-style-type: none"> • Copy of divorce decree/separation papers or evidence of separate living accommodations. • 2024 signed Tax Return(s) and 2024 W-2 Forms • 2025 signed Tax Return(s) and 2025 W-2 Forms • Provide a detailed letter of appeal that explains how your family’s financial situation has changed since 2024 • 2026-27 Income Verification Worksheet and the 2026-27 Family Size Verification Worksheet
<input type="checkbox"/> Retirement (Student, Spouse or Parent)	<ul style="list-style-type: none"> • Letter of separation from employer (on company letterhead) • Copy of last pay stub showing earnings. • Statement of retirement benefits. • Provide a detailed letter of appeal that explains how your family’s financial situation has changed since 2024 • 2026-27 Income Verification Worksheet and the 2026-27 Family Size Verification Worksheet • 2024 signed Tax Return(s) and 2024 W-2 Forms • 2025 signed Tax Return(s) and 2025 W-2 Forms
<input type="checkbox"/> Death of Parent or Spouse	<ul style="list-style-type: none"> • Photocopy of death certificate. • Provide a detailed letter of appeal that explains how your family’s financial situation has changed since 2024 • 2026-27 Income Verification Worksheet and the 2026-27 Family Size Verification Worksheet • 2024 signed Tax Return(s) and 2024 W-2 Forms • 2025 signed Tax Return(s) and 2025 W-2 Forms
<input type="checkbox"/> Involuntary Loss of Employment (Student, Spouse or Parent)	<ul style="list-style-type: none"> • Letter of separation from employer (on company letterhead) • Copy of last pay stub from previous employer • Letter from current employer(s) stating wages earned to date and estimated 2026 calendar year income • Copy of Unemployment Benefit Payment History OR statement of ineligibility. • Provide a detailed letter of appeal that explains how your family’s financial situation has changed since 2024 • 2026-27 Income Verification Worksheet and the 2026-27 Family Size Verification Worksheet • 2024 IRS signed Federal Tax Return(s) and 2024 W-2 Forms • 2025 IRS signed Federal Tax Return(s) and 2025 W-2 Forms
<input type="checkbox"/> Loss of Other Income (Student, Spouse or Parent)	<ul style="list-style-type: none"> • Statement of Benefits (e.g. social security). • Letter regarding ending payments from parent paying child support or statement from Friend of the Court, including stop date and amounts. • Provide a detailed letter of appeal that explains how your family’s financial situation has changed since 2024 • 2026-27 Income Verification Worksheet and the 2026-27 Family Size Verification Worksheet • 2024 signed Tax Return(s) and 2024 W-2 Forms • 2025 signed Tax Return(s) and 2025 W-2 Forms
<input type="checkbox"/> Medical Expenses (not included on Federal 1040 Schedule A)	<ul style="list-style-type: none"> • Medical receipts. • Provide a detailed letter of appeal that explains how your family’s financial situation has changed since 2024 • 2026-27 Income Verification Worksheet and the 2026-27 Family Size Verification Worksheet • 2024 signed Tax Return(s) including all schedules • 2025 signed Tax Returns(s) including all schedules



2026-27 Special Circumstances Appeal Form (continued)

Name _____ Student ID/SS# _____

Be certain you have completed the following before submitting your appeal to us:

- Complete all sections of this form. If the answer is zero or not applicable, write a "0" in the appropriate place.
- If income is "Other Taxable Income" (column 4) or "Other Untaxed Income" (column 5) please circle the source of income being reported
- Attach all documentation as required and sign/date the bottom of this sheet.

2026 Income (earned and/or projected)	Parents' Income From Work (Gross)	Student and/or Spouse's Income From Work (Gross)	Interest/Dividend Income, Alimony, Pension Benefits, Annuities and Other Taxable Income	Unemployment Compensation, Social Security Benefits for all family members, Disability Benefits, Child Support, Workmen's Compensation, Life Insurance Proceeds, Insurance Settlement Proceeds & Other Untaxed Income
January 2026	\$	\$	\$	\$
February 2026	\$	\$	\$	\$
March 2026	\$	\$	\$	\$
April 2026	\$	\$	\$	\$
May 2026	\$	\$	\$	\$
June 2026	\$	\$	\$	\$
July 2026	\$	\$	\$	\$
August 2026	\$	\$	\$	\$
September 2026	\$	\$	\$	\$
October 2026	\$	\$	\$	\$
November 2026	\$	\$	\$	\$
December 2026	\$	\$	\$	\$
TOTAL	\$	\$	\$	\$

Certification: All of the information on this form is true and accurate to the best of my knowledge. I understand I may be asked for additional documentation. I realize that if I do not give proof when requested, I, the student, may be denied aid.

Print Student's Name _____

Student's Signature _____ Date _____

Please print this form to sign

Parent's Signature _____ Date _____

(dependent students only) Please print this form to sign

Once completed, return this form and additional documents to the Office of Financial Aid, SC4 Welcome Center, Room 251, or financialaid@sc4.edu.