

Financial Aid
141 College Drive, Albemarle, NC 28001
Tel: (704) 991-0302 Fax: (704) 991-0160
financialaid@stanly.edu

2023-2024 SPECIAL CIRCUMSTANCES REQUEST

Name:		Student ID #:	
Daytime Phone:		E-mail:	
impacted the household incomresult in changes to your 2023	ne and would like to a 3-2024 financial aid remust have completed	ave experienced unusual circumstances that have negrequest a review of the circumstances. A review may ecord as a result of a Financial Aid Administrator products at the 2023-2024 Free Application for Federal Studentest.	or may not ofessional
_	_	est is for the income of: Note: If both parent of a change, each must submit their own required.	
		Student Parent	
2. Special Circumsta	inces Request is	because:	
☐ Benefit loss ☐ Death of Pa	or Income reduct arent or Spouse	(involuntary loss of employment, retirement, job change, bankrup tion enses incurred in the year 2020 (uninsured medical expenses, cata	
	be made to a federo	ion: Note: Substantial supporting documentation of the substantial supporting documentation of the financial Aid Officen, as needed.	_
B) Depending o a. If ap date rece b. If ap c. If ap	n what was checked in oplicable, all changes of employment; state on the copy of dea oplicable, copy of dea		opies of most
		s can take several week but no more than 60 days and should be prepared to pay any and all out of pocket	
SIGNATURES			
Aid Office at Stanly Commun	ity College of any er d information. I und	complete to the best of my knowledge. I agree to not ror, omission, or of any further circumstances that merstand that failure to comply with this agreement co.	ay affect the
Student Signature	Date	Parent Signature (if student is dependent)	Date