Dear Student,

The primary responsibility for financing a student’s education rests with the student and their family. Unless a student is classified as Independent* for financial aid purposes by federal definition, parental income and asset information must be included in determining eligibility. Student (and parents, when applicable) contributions (together making up the Expected Family Contribution or EFC) are calculated using a congressionally mandated needs-analysis formula. The CCCC Financial Aid Office recognizes this formula may not always accurately reflect special circumstances for individual students and/or families.

If your situation has changed drastically from the information you provided on the 2013-2014 Free Application for Federal Student Aid (FAFSA) and the situation falls into one of the categories listed in this form, you may submit a complete Special Circumstance Appeal with the required documentation.

Once a completed request is reviewed, it may result in either: 1) a reduction in the base year income and/or assets; 2) the use of income for the current calendar year; or 3) an increase in Cost of Attendance (COA) for the current academic year.

If you wish to proceed, with this Special Circumstance Appeal, please check and complete all applicable sections on the following pages and attach all required documentations, then mail to:

Coastal Carolina Community College
Office of Financial Aid
444 Western Boulevard
Jacksonville, NC 28546

An incomplete application will be returned. Please, do not submit this form unless the form is completed and all requested documentation, signatures, and requirements have been met.
2013-2014 REQUEST FOR CONSIDERATION OF SPECIAL CIRCUMSTANCES

In cases where 2013 family income is expected to be substantially less than 2012, or if you have special circumstances we should take under advisement, you may request a review of family contribution and financial aid eligibility. Complete and return this form to the Financial Aid Office along with documentation to support your request.

Student Name: ____________________________________________________________ SS#:___________________________

Reasons for review of financial aid eligibility: Check condition and circle the person for whom it applies:

- You / Your Spouse / Your Parent(s) was / were employed in 2012 but is / are now unemployed or under employed.  
  **Suggested Documentation:** Statement from Employer.

- You / Your Spouse / Your Parent(s) earned money in 2012, but has / have been unable to pursue normal income-producing activities during 2013 due to a disability or natural disaster.  
  **Suggested Documentation:** Physician's statement or written description of natural disaster.

- You / Your Spouse / Your Parent(s) received unemployment compensation, child support, or Social Security benefits or other untaxed income in 2012 and have had a complete loss of those benefits in 2013.  
  **Suggested Documentation:** Letter of explanation from source of benefit.

- Your Spouse / Parent whose 2012 income was reported on your application for Federal Student Aid has died since you submitted your application.  
  **Date of Death:** _____/_____/______  
  **Suggested Documentation:** Death Certificate

- You/Your Parents have separated/divorced and income from both parties was reported on the application for Federal Student Aid for 2012.  
  **Suggested Documentation:** Separation Agreement or Divorce Decree

- Your parent(s) will be attending college at least half-time between July 1, 2013 and June 30, 2014, and will be enrolled in a degree or certificate program.  
  **Name of parent(s) who meet this definition:** __________________________________________  
  **College(s) that parent(s) will attend:** __________________________________________  
  **Suggested Documentation:** Proof of enrollment from the college(s) that parent(s) attend.

- Other: Please explain briefly and concisely those circumstances you wish us to consider when reviewing your financial aid eligibility. Examples include: non-reimbursed medical costs, one-time bonus etc. Please submit documentation supporting the circumstances with this form.
  ___________________________________________________________________________  
  ___________________________________________________________________________  
  ___________________________________________________________________________
### Student / Spouse / Parent(s) Expected 2013 Income and Expenses (if required)

<table>
<thead>
<tr>
<th>Item</th>
<th>Student / Spouse</th>
<th>Parent(s)</th>
</tr>
</thead>
<tbody>
<tr>
<td>2013 Income earned from work by student / father:</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>2013 Income earned from work by spouse / mother:</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>2013 U. S. Income Taxes to be paid:</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>2013 Other Taxable Income (e.g. unemployment benefit):</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>2013 Social Security Benefits:</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>2013 AFDC/ADC or TANF Benefits:</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>2013 Other non-taxable income or benefits:</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Total Expected 2012 Income:</strong></td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

--- FOR OFFICE USE ONLY ---

**Approved**  ● Recalculated EFC: __________  ● ISIR reprocessed _____ / _____ / _____

Data amounts to be adjusted: ____________________________________________________________

**Denied**  Reason: _________________________________________________________________

I hereby use my professional judgment to adjust / not adjust this student's expected family contribution.

_____________________________________________  ________________________
Financial Aid Director                         Date