



Tompkins Cortland Community College
Financial Aid Office
170 North Street, PO Box 139
Dryden, NY 13053-0139
Ph (607) 844-6580 FAX (607) 844-6538

Before you submit your special circumstance form make sure you have done the following:

- Completed section A of the special circumstance form.
- Completed section B of the special circumstance form.
- Completed section C of the special circumstance form.
- Completed section E of the special circumstance form.
- Completed section F of the special circumstance form.
- Submitted a copy of your 2015 Federal Tax Transcript*.
- Submitted copies of your 2015 W-2 Forms.
- Submitted a copy of your Parent's 2015 Federal Tax Transcript*.
- Submitted copies of your Parent's 2015 W-2 Forms.
- All required signatures are on the form.
- All required documentation to support your change is included.

***To request an IRS Tax Return Transcript: You may order on line at www.irs.gov, click on "Get Transcript for MyTax Records under tools and select online or by mail. You can also phone 1-800-908-9946 to request a tax transcript**

IF YOUR FORM IS INCOMPLETE IT WILL BE RETURNED TO YOU WITH NO ACTION!!!



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2016- 2017 SPECIAL CIRCUMSTANCE FORM

Student Name _____ Student ID # _____

Current Address: _____
Street City State Zip Code

Phone # _____ Email Address _____ @mymail.tc3.edu

INSTRUCTIONS: Read through reasons below and check all boxes that apply to your situation in Section A, and attach appropriate documentation: Complete Section B, C, E and F. Send Copies of 2015 FEDERAL TAX TRANSCRIPTS and W-2'S FOR THE STUDENT (if dependent) AND PARENT - OR STUDENT AND SPOUSE (if married).

IRSTAX TRANSCRIPTS MUST BE SUBMITTED WITH THIS FORM AND ALL SECTIONS NEED TO BE COMPLETED OR NO ACTION WILL BE TAKEN AND THIS FORM WILL BE RETURNED TO YOU.

SECTION A: SPECIAL CIRCUMSTANCE (Please check your Special Circumstance)

Loss/ Change of Employment - Please submit:

- Copy of last pay stub showing year-to-date earnings.
Termination notice from employer on letterhead.
A current notice from Unemployment.

Separation or Divorce - Please submit:

- A copy of the divorce decree or separation agreement, or a signed statement including the date that the separation occurred along with proof of separate addresses.

Loss of Taxable/Untaxed Income (such as child support, social security, alimony, etc.)

Please submit:

- Documentation from agency stating total amount received in 2015.
Documentation of termination date.
Documentation of updated 2016 amount.

Death of Parent or Spouse - Please submit:

- A copy of the death certificate

Medical/Dental Expense (expenses paid in calendar year 2015 not covered by insurance)

Please submit:

- Receipts of medical bills paid in 2015 that exceeded 11% of your 2015 adjusted gross income.

SECTION B: HOUSEHOLD INFORMATION - LIST ALL MEMBERS INCLUDED IN YOUR HOUSEHOLD

Table with 4 columns: NAME, RELATIONSHIP, AGE, NAME OF COLLEGE (if enrolled). Row 1: Self, Tompkins Cortland Community College.

