

NORTH CENTRAL MICHIGAN COLLEGE
FINANCIAL AID OFFICE**SPECIAL CIRCUMSTANCES FORM**

2026 - 2027

Student's Name: _____ ID #: _____ Date: _____
Telephone Number: _____

The Special Circumstances Form is used on a case-by-case basis when there has been **involuntary**, permanent income changes, unusual expenses, or changes in personal circumstances that occurred in the past year. The special circumstances can be re-evaluated for both a dependent or independent student and, also, for a dependent student's parents. This may include:

- loss of employment / retirement
- death / disability
- loss of untaxed income, other income, or benefit
- unusual expenses

This form requests information needed to re-evaluate your financial situation. This re-evaluation is not an assurance that you will qualify for aid, or if already eligible, will qualify for additional aid. Furthermore, any new award amount would be contingent upon the availability of funds at the time this re-evaluation is made.

Complete the appropriate section or sections below - Student or Parent (of dependent student only). Do not forget to attach supporting documentation and sign the appropriate section or sections. The completed form and required documentation are to be submitted to Financial Aid.

Please explain why you are requesting a Special Circumstance. What has income changes, unusual paid expenses, or changes in personal circumstance have changed in the past year?

Documentation to be submitted with form (copies please):

1. Last pay stub from employer showing earnings to date if from 2025.
2. Earnings expected for remainder of 2026.
 - Example: most recent pay stub from new employment, unemployment award letter, or proof of other income expected.
3. 2024 signed tax return with all W-2s.
4. Legal documents verifying separation or divorce, Disability documentation, death certificate/obituary since 2024 tax year, Documentation of last date or change in untaxed income, etc.

STUDENT CERTIFICATION:

All of the information on this form is true and complete to the best of my/our knowledge. I/we understand I/we may be asked for additional documentation. I/we realize that if I/we do not provide the required documentation when requested, the student may be denied aid.

_____ / /	_____
Student's Signature	Date

_____ / /	_____
Spouse's Signature	Date

PARENT(S) CERTIFICATION (If Dependent Student):

All of the information on this form is true and complete to the best of my/our knowledge. I/we understand I/we may be asked for additional documentation. I/we realize that if I/we do not provide the required documentation when requested, the student may be denied aid.

_____ / /	_____
Father's (Stepfather's) Signature	Date

_____ / /	_____
Mother's (Stepmother's) Signature	Date

Return form to: The Financial Aid Office Located in the Borra Learning Center
Email: financialaid@ncmich.edu Phone: 231-348-6698