

2017–2018 REQUEST FOR SPECIAL CIRCUMSTANCE INCOME REVIEW

Last Name	First Name	M.I.	SCC ID Number	
FAFSA. If you have exp may request an "Income (credit card and loan pay result in a change to dat Contribution) or COA (C your award will be effect	rerienced unusual and special circle. Review". Please be advised that ments) are not considered unusual elements reported on the FAFS ost of Attendance). If your Specifive for the 2017-2018 aid year. T	cumstances that cau it personal expenses ual or special circum SA resulting in a char al Circumstances-Inc The Solano Commun	on 2015 income data reported on the sed your income to drastically decrease, you for lifestyle choices and consumer goods stances. The "Income Review" process may not be your EFC (Expected Family come Review is approved, any changes to lity College Financial Aid Administrator's ed to the U.S. Dept. of Education.	
2016 than the 2015 inco	or Special Circumstance Income me reported on your 2017-2018 I Do not submit a request for a s	FAFSA application.	s or your parent(s) income will be less in ot already happened.	
Deadline to submit the	ne Request for Special Circu	ımstance Income	Review: April 6, 2018 at 12:00 pm	
Request for Special Circ the result on your mySol		ke an average of <u>6-8</u>	weeks for processing. You will be notified of	
	018 Einaneial Aid file must be v	verified and proces	sed prior to submission. Any incomplete	
	come Review requests will be ref			

Current Income Review Verification Documents:

Income Transcript) with your request.

Not all documents listed may apply to your situation. However, you must provide adequate documentation to support your request.

☐ Complete the 2017-2018 Dependent or Independent Verification Worksheet, whichever applies.

☐ You must provide a copy of your 2016 IRS Tax Return Transcript and W-2(s) (or an IRS Wage &

Attach required documentation when submitting your request based on your Explanation of Income

- Letters stating lay-off or reduction in work hours. Copy of Severance pay received.
- Agency statements of 2016 year-to-date benefits received for social security, retirement, disability, worker's compensation, unemployment, etc.
- Divorce agreement designating family and child support, statement from the county Family Support
 Office, or signed statement from the person paying the support, to verify 2016 child support that has
 been received.
- · Denial of Benefits Letter.

Reduction.

• Any other documents to clarify your situation.

Student's Name:		SCCID#:	
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Explanation of Incor			
	e reason(s) for your request ar		nge. Be specific regarding
your income reduction. Pl	ease attach additional sheets it	necessary.	
Certification:			
	(s) below, all information provided		
	e SCC Financial Aid Office may red give false or misleading informati		
	ned, sentenced to jail, or both.	o o u , , o u o	
<u>Note</u> :	If you are a dependent student,	your parent must also sign	n this form.
Student Signature:			Date:
Student Signature			Date
Parent Signature:			Date:
J			
	xed copies will NOT be accepted.	-	
your request in person at the documents are attached.	e Fairfield Campus or at the Vacav	rille, vallejo or Travis AFB Ce	nters, provided all required
uocuments are attached.			
Fairfield Campus	Vacaville Center	Vallejo Center	Travis AFB Center
Financial Aid Office	2001 North Village Pkwy.	545 Čolumbus Pkwy.	530 Hickam Ave.
4000 Suisun Valley Rd.	Vacaville, CA 95688	Vallejo, CA 94591	Bldg. 249