

If you wish to pursue an appeal, follow these instructions:

Step 1: Review the Special Circumstance/Required Documentation table below to determine what documents you will be required to submit. Be sure to include all that is indicated as we cannot complete your appeal without them.

Step 2: In the space below, provide written information explaining your special circumstances. Be as specific as possible by including details pertinent to your family’s new situation such as dates, causes, etc. This statement is a requirement of the appeal process.

Step 3: In order to avoid delays in making a final determination, please submit all requested documentation in a timely manner. Allow 2 to 3 weeks for the SSCC Financial Aid Office to process your completed appeal.

- NOTE: Tax returns must be signed by the tax filer and include all schedules filed that year.
- NOTE: Additional documentation may be requested after our initial review of what has been received.

SPECIAL CIRCUMSTANCE		REQUIRED DOCUMENTATION
Loss of Income or Employment in 2025 - Wages/Employment - Business Income - Alimony - Child Support - Retirement/pension - Social Security (taxed) - Worker’s Compensation	Income/benefits in 2025 were less than that in 2024	-2025 IRS Data Retrieval or signed Tax return 1040 and all schedules -2025 W-2 wages statement for all -2025 signed Tax Return 1040 and all schedules -2025 W-2 wage statements for all -Documentation showing loss of income for 2025 including revised benefits statements or unemployment benefits statement
Loss of Income or Employment in 2026 - Wages/Employment - Business Income - Alimony - Child Support - Retirement/pension - Social Security (taxed) Worker’s Compensation	Income/benefits expected for 2026 have been reduced	-2025 IRS Data Retrieval or signed Tax return 1040 and all schedules -2026 W-2 wages statement -Documentation of Business Income for the 2025 calendar year If loss of employment, documentation showing loss of employment in 2026.

		<ul style="list-style-type: none"> -Final paystub showing year-to-date earnings -Termination notice from the employer -Most recent paystub showing 2025 year-to-date earnings for -Documentation showing loss of income for 2025 including revised benefits statements or unemployment benefits statement
Separation or Divorce	You or your parents separated or divorced after filing 2024 taxes	<ul style="list-style-type: none"> -2024 signed Tax Return 1040 and all schedules. -2024 W-2 wage statements for all. -Divorce decree/separation agreement or proof of separate addresses. -Documentation showing the division of all other income shown on the tax return. -Signed statement detailing special circumstances.
Death of a parent or spouse	A parent or spouse died after filing 2024 taxes	<ul style="list-style-type: none"> -2024 signed Tax Return 1040 and all schedules. -2024 W-2 wage statements for all. -Documentation showing the division of all other income shown on the tax return. -Applicable death certificate.
Medical/Dental Expenses Only paid excessive medical/dental expenses not covered by insurance can be reported. → Expenses must exceed 11% of a family's adjusted gross income.	Paid 2024 or 2025 medical expenses	<ul style="list-style-type: none"> -2024 signed Tax Return 1040 and all schedules. -2024 W-2 wage statements for all. -Proof of all out-of-pocket paid expenses for 2024 <p style="text-align: center;">OR</p> <ul style="list-style-type: none"> -2025 signed Tax Return 1040 and all schedules -2025 W-2 wage statements for all. -Proof of all out-of-pocket paid expenses for 2025.
One-time (Lump Sum) Payment Received	A one-time, lump-sum payment was received in 2024 or in 2025	<ul style="list-style-type: none"> -2024 signed Tax Return 1040 and all schedules. -2024 W-2 wage statements for all. -2025 signed Tax Return 1040 and all schedules. -2025 W-2 wage statements for all. -Documentation of Lump Sum Payment.

*If you have other circumstances not mentioned on this form but you feel should be taken into consideration, please write a detailed description of your circumstance and we will review your individual circumstances and determine if any change is possible to your financial aid application information.

SECTION C: Certifications

By signing this form, I certify that the information included on this form is true to the best of my knowledge. I agree to provide Southern State Community College with updated information if my financial circumstances change from what is reported on this form. I also understand that if I provide false or misleading information, I may be subject to a fine, a prison sentence, or both.

Student's signature:

SSCC Student ID #:

Date:

Parent's signature (if applicable):

Date: