



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

The Tompkins Cortland Community College financial aid office has the ability to adjust a student's cost of attendance or the data used to determine a student's EFC, Expected Family Contribution.

A special circumstance can be initiated by the student or parent based on a change in situation from the reported years information. By completing the request for a special circumstance you are initiating the process. The financial aid office will contact you to request the documentation necessary for your specific situation. Once you have completed the form please submit it to the financial aid office.

The Special Circumstance is available on the Tompkins Cortland Community College web page, <https://www.tompkinscortland.edu/admissions/important-forms>, or in the financial aid office by request.

Return this form to:

**Tompkins Cortland Community College Financial Aid Office**  
**P.O. Box 139, 170 North Street**  
**| Dryden, New York 13053-0139**  
**Phone: 607.844.6580 | Toll Free: 888.567.8211 |**  
**Email: [aid@tompkinscortland.edu](mailto:aid@tompkinscortland.edu) | Fax: 607.844.6538**



2024-2025 SPECIAL CIRCUMSTANCE FORM

Student Name \_\_\_\_\_ Student ID # \_\_\_\_\_

Current Address: \_\_\_\_\_

Phone # \_\_\_\_\_

Email Address \_\_\_\_\_ @mymail.tc3.edu

INSTRUCTIONS: Read through reasons below and check all boxes that apply to your situation. The financial aid office will be in contact with you to request any documentation needed.

SPECIAL CIRCUMSTANCE (Please check the reason for your Special Circumstance Request)

\_\_\_ Reduction in income

\_\_\_ Separation or Divorce

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

\_\_\_ Death of Parent or Spouse

\_\_\_ Medical/Dental Expense (expenses paid in calendar year 2022 not covered by insurance)

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.

BRIEF EXPLANATION for the SPECIAL CIRCUMSTANCE REQUEST (attach a separate sheet if needed) Please print.

Multiple horizontal lines for writing the explanation.

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**SIGNATURE:**

\_\_\_\_\_  
Student's signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student's Spouse's signature (if applicable)

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent's signature (if student is dependent)

\_\_\_\_\_  
Date

**FOR OFFICE USE ONLY:**

Prior Year Special Circumstance?	Yes	No	
Special Circumstance Approved:	Yes	No	Old EFC ____
Special Circumstance Denied:	Yes	No	New EFC __
Sent Letter: _____	Approved by: _____	Date _____	