GRACE COLLEGE 2026-2027
Special Circumstances Form

Student:_____ SSN:_____

You may request a recalculation of your financial aid if you meet one of the following conditions.
Check the conditions that apply and submit all of the following:

1. Special Circumstances Form
2. A descriptive, detailed letter of the circumstances, and
3. The documentation for each situation (see page 2)

1. ☐ I or my parents earned less money in 2026 compared to 2024 due to a job change, unemployment for at least 10 weeks, disability, or natural disaster.
2. ☐ Since completing the 2026-2027 FAFSA, my parents have become separated or divorced, or my parent(s) have died.
3. ☐ My family paid large, out of pocket medical expenses in 2026.
4. ☐ My family is paying tuition for a sibling to attend a Christian elementary, middle, or high school, or private or public college in 2026-2027.
5. ☐ Due to other unusual circumstances, my family's income will be significantly less in 2026 than it was in 2024.

COMPLETE THE TABLE BELOW WITH YOUR PROJECTED 2025 INCOME AND CURRENT FAMILY INFORMATION

Student's estimated income for the period January 1 to December 31, 2026 $_____

Parent's estimated income for the period January 1 to December 31, 2026 $_____

Child support received in 2026 $_____

Number of family members in student's household_____

Family members in college at least 1/2 time in 2026-2027 (including students attending Grace College):

Name:_____ College Attending:_____

Name:_____ College Attending:_____

Name:_____ College Attending:_____

Certification Statement: I understand that if I knowingly make a false statement or misrepresentation, further financial assistance may be denied and repayment of current assistance may be required. I certify that all information submitted with this request is true and complete to the best of my knowledge. If asked, I agree to provide any documentation requested by the Financial Aid Office to prove the accuracy of this information.

Student's Signature:_____ Date:_____

Parent's Signature:_____ Date:_____

Email: _____ Phone Number: _____

REQUIRED DOCUMENTATION

Submit the following documentation according to the conditions met on the front of the form:

1. Parent or student income decreased in 2026 compared to 2024: Documentation of income from January 1 to December 31, 2026 (paystubs, unemployment income statement) for both students and parents.

2. Parents separation/divorce or parent(s) death: Provide a copy of court documents regarding legal separation/ divorce or a copy of the death certificate. Also provide documentation of income from January 1 to December 31, 2026 (paystubs, unemployment income statement) for parent who has provided the most financial support over the last 12 months, or surviving parent in the case of the death of a parent.

3. Large, out of pocket medical expenses: Provide receipts of medical expenses paid out of pocket in 2026, as well as an itemized list of the amounts paid, dates paid, medical agency, and name of person medical expense was for.

4. Tuition paid for sibling: For Christian elementary, middle, and high school tuition, provide a receipt or billing statement for the 2026-2027 school year. For college tuition, provide a copy of the tuition statement for the 2026-2027 year that shows the charges, financial aid, and balance for the fall 2026 semester or 2026-2027 year.

5. Other unusual circumstances: Provide documentation to support your letter describing your circumstances.

Note: Additional documentation may be required after initial review. Providing the information may or may not increase your eligibility for financial assistance.