



# TOCCOA FALLS COLLEGE

## Office of Financial Aid

107 Kincaid Dr MSC 900 Toccoa Falls, GA 30598

Email: [finaid@tfc.edu](mailto:finaid@tfc.edu) Phone: (706) 914-8681 Fax: 706-282-6041

### Special Circumstance Adjustment Request

*Student's Last Name*

*Student's First Name*

*Student's DOB*

Eligibility for financial aid is determined by the Free Application for Federal Student Aid (FAFSA), which currently uses financial information from two years prior to estimate a household's current ability to pay for college. The Office of Financial Aid recognizes that households can experience changes in income or other circumstances that are not reflected in their information from two years prior. When these situations occur, it is possible for a Financial Aid Administrator to re-evaluate a student's aid eligibility based on their current circumstances through the Professional Judgment (PJ) process. All Professional Judgment applications are required to have a detailed letter of explanation and supporting documentation. Under most circumstances, a student must have been issued a financial aid offer based on a verified FAFSA prior to consideration of special circumstances.

Adjustments can be approved only in situations provided for by federal regulation and policy that have been appropriately documented. Failure to submit documentation to support the circumstances surrounding the request will result in a denial of the appeal. Submission of this request does not guarantee that any adjustments can be made. In addition, the Office of Financial Aid may request additional documentation upon review of the request.

#### Non-applicable Circumstances

- Standard living expenses (utilities, car payments, etc)
- Mortgage payments
- Credit card/other personal debts
- Filing for bankruptcy
- All other discretionary expenses
- Parent refusal to pay for educational expenses

#### Most Common Types of Special Circumstances Warranting FAFSA Adjustments

If your situation fits into an approved category listed below, please submit this form along with any listed supporting documentation to the Toccoa Falls College Financial Aid Office. Once submitted, please allow 1-2 weeks for processing.

If your situation does not fit into one of the approved categories listed below, please call the Financial Aid Office at (706) 914-8681 to discuss your circumstance to see what options may be available to you.

#### ***Change to Student Aid Index (SAI)***

The following items could potentially result in a change in a student's Student Aid Index:

- Loss or change of employment or income
- Divorce/Separation of parent
- Change in marital status of student
- Death of parent(s) or spouse
- Excessive out of pocket medical and/or dental expenses
- One-time income (IRA disbursement, pension distribution, etc.)

A change in SAI could result in a change of eligibility for need-based grants (but it is not guaranteed).

#### ***Change to Cost of Attendance (COA)***

The following expenses could potentially be included in a student's Cost of Attendance:

- Costs associated with a student's disability
- Childcare expenses for a child of the student
- One-time purchase for a computer for educational needs
- Other costs if determined to be an educational necessity by the Financial Aid Office

A change to the COA will not result in a change in eligibility for need-based grants. There is a potential for an increase in student loan eligibility (but it is not guaranteed). Please note that any additional funds would still be subject to the college's refund policy available at <https://tfc.edu/consumer-info>.

Submit this form to:  
**Office of Financial Aid**  
**107 Kincaid Drive MSC 900**  
**Toccoa Falls, GA 30598**  
**[finaid@tfc.edu](mailto:finaid@tfc.edu) • 706-914-8681 • 706-282-6041 (Fax)**



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### Special Circumstance Adjustment Request

Please check the appropriate reason(s) for your request below and submit all required documentation listed for that circumstance.

- Loss or change of employment or income**
  - Detailed letter explaining the circumstance signed by either the student or parent
  - Letter from former employer reflecting the last date worked
  - Copy of the last pay stub showing year-to-date earnings
  - Signed copy of 2024 taxes (if tax-filer)
- Divorce/Separation of parent**
  - Copy of the divorce decree or a letter of separation
  - Signed copy of 2024 taxes
  - Copies of all W2s and 1099s for both parents
- Change in marital status of student**
  - Copy of marriage certificate or divorce decree
  - Signed copies of 2024 taxes for both parties (if they filed taxes)
  - Copies of all W2s and 1099s for both parties
- Death of parent(s) or spouse**
  - Copy of death certificate or obituary for deceased individual
- Excessive out of pocket medical and/or dental expenses**
  - Detailed letter explaining the circumstance signed by either the student or parent
  - Copies of all bills/receipts and an itemized list of all medical and/or dental expenses
- One-time income (IRA disbursement, pension distribution, etc.)**
  - Detailed letter explaining the circumstance signed by either the student or parent (include dates)
  - Signed copies of 2023 and 2024 taxes
  - Any supporting documentation that pertains to the circumstance
- Cost of Attendance Increase**
  - Detailed letter explaining the circumstance signed by either the student or parent
  - Any supporting documentation that pertains to the circumstance
- Other**
  - Detailed letter explaining the circumstance signed by either the student or parent
  - Any supporting documentation that pertains to the circumstance
  - Any additional information requested by the Financial Aid Office

All parties that sign below certify that all the information provided is correct. Providing false or deliberately misleading statements is a violation of federal law and may result in a prison sentence, fines, or both. The Toccoa Falls College Office of Financial Aid reserves the right to request any additional documentation that may be necessary in making this determination. Failure to submit all requested documentation will result in a denial of the request. Please note that all decisions are final.

\_\_\_\_\_  
*Student's Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Student's Name (Please Print)*

\_\_\_\_\_  
*Parent's Signature (if dependent student)*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Parent's Name (Please Print)*

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