2025-26 Special Financial Circumstances Form (SFC)

For consideration of need-based aid only

Student's Full Name: _____ Student ID #: _____

Parent Name: _____ Parent Phone #: _____

We know certain situations and events can affect a family's ability to pay for college, and it is important that you make us aware of unusual financial circumstances that you believe are not reflected accurately on the FAFSA (Free Application for Federal Student Aid) and/or CSS Profile. While we have limits on what we can do, we will look at your individual situation carefully. Before a review will be considered, you must complete the 2025-26 FAFSA **and** CSS Profile, and submit all required documents with this form.

We will **not** consider the following situations:

- Another college's/university's financial aid/scholarship offer (i.e., we do not negotiate financial aid offers)
- *Possible* reduction in income due to fluctuating commissions
- Refusal of a parent or stepparent to provide financial support to the applicant/student
- Events that "may occur" in the future
- Refusal to borrow student loans
- Refusal to complete the FAFSA

Special Circumstance (Check all that apply)	Required Supporting Documentation
☐ **Loss or Change of Employment/Reduction of Income**	◊ Explanation of circumstances surrounding loss or reduction of income (who, effective date) ◊ Most recent pay stub with year-to-date earnings. ◊ Termination notice from employer (on business letterhead) indicating date of separation. *Please wait 12 weeks after last day of employment before submitting this form.* ◊ Severance statement (if applicable) ◊ Unemployment benefits statement (if applicable)
☐ **Loss of untaxed income or benefits (i.e. child support, Social Security benefits, AFDC, housing allowance, etc.)**	◊ Explanation of circumstances surrounding loss or reduction of income/benefit (who, effective date) ◊ 2023 Benefit Statement listing total amount received ◊ Revised 2024 Benefit Statement listing revised amount & effective date
☐ **Parent's Separation/ Divorce**	◊ Name of parent that will remain on FAFSA (custodial parent) ◊ Documentation verifying separation or divorce (decree, court documents)
☐ **Death of Parent**	◊ Copy of death certificate
☐ **Medical/Dental Expense**	◊ Explanation of expenses (total paid out of pocket in 2024 and 2025) ◊ Documentation of outstanding medical bills not reimbursed or paid by insurance

Special Circumstance Details & Required Documentation:

If an explanation is necessary for any section above, please print:

_____

_____

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2025 Estimated Household Income:

Additional documentation:

- Dependent student- attach 2023 & 2024 federal tax returns for both parents. If the student's income was affected, please also provide a copy of the student's tax returns. If no tax return was filed but the student had earnings, please attach the applicable W-2(s).
- Independent student- attach 2023 & 2024 federal tax returns for student/spouse.
- Attach the most recent pay stub showing new/changed salary, if applicable. Include the last pay stub from any position terminated in 2025. Also, include documentation of unemployment benefits, retirement income, severance pay, etc.

	Student	**Father/Step-father**	**Mother/Step-mother**
Actual 2025 gross income from all sources to date. Date: ____/_____/_____			
Estimated 2025 gross income from all sources until end of the year			
Total Estimated 2025 Gross Income			

Your Request from Furman:

- What dollar amount of additional financial assistance are you and your family requesting? _____
- How did you derive that figure? _____

  _____

  _____
- Are you willing to borrow a portion of your requested amount?_____

- If not, please explain your hesitancy to do so? _____

_____

_____

Certification:

By signing below, we (the parent and the student) affirm the information provided on this form are true and complete to the best of our knowledge. We further understand that submission of this information does not guarantee an increase in my financial aid package.

Student: _____ **Date:** _____

Parent: _____ **Date:** _____

The Office of Financial Aid has the responsibility for reviewing this information and for determining appropriate adjustments. While we strive to render decisions within five-to-ten business days, circumstances such as workload within the office may necessitate a longer timeframe. Students will be notified via email of the appeal decision. **This form is specific to need-based aid only.**

Please mail, email, or fax this completed form & documentation to:

Furman University
Office of Financial Aid
3300 Poinsett Highway
Greenville, SC 29613

Phone: (864) 294-2351
Fax: (864) 294-3127
financialaid@furman.edu

Please be sure to redact all personally identifiable information from any documentation that you send to our office such as social security numbers, date of birth, etc.