



# DALLAS COUNTY COMMUNITY COLLEGE DISTRICT

## 2019-2020 Special Circumstance Application

Scanning  
 Doc Category: Grants  
 Doc Type: Special Cond.  
 Scanned: Completed  
 Award Year: 2019

The purpose of this form is to provide the student the opportunity to submit a special case for review. To secure a class schedule, the student must ensure tuition is paid in full and be enrolled in a minimum of six (6) credit hours.

Office Use Only: CPS Selected for Verification Yes or No // Completed? Yes or No

### SECTION I: Student Information

|                    |                     |                   |                            |
|--------------------|---------------------|-------------------|----------------------------|
| _____<br>Last Name | _____<br>First Name | _____<br>M.I.     | _____<br>Student ID #      |
| _____<br>Address   |                     |                   | _____<br>Email             |
| _____<br>City      | _____<br>State      | _____<br>ZIP Code | _____<br>Primary Contact # |

### SECTION II: Student Reason. Check the box that best describes the reason for this review.

- Loss of Employment or Drastic Change in Income
- Loss of Income due to Divorce or Separation
- Loss of Income due to Death of Spouse/Parent(s)
- Loss of Income due to Disability
- Unusually High Medical or Dental Expenses
- Unaccompanied Homeless Youth
- Previous Year One-time Increase in Income Amount
- Elementary or Secondary School Tuition for Students, Siblings or Dependents
- Dependency Override
- Other \_\_\_\_\_

### SECTION III: Signature Requirements

Turning in this form does not establish approval. Once the student submits this form, the Financial Aid Office designee will meet with the student to discuss documentation to be submitted.

|                                     |               |                             |               |
|-------------------------------------|---------------|-----------------------------|---------------|
| _____<br>Student Signature          | _____<br>Date | _____<br>Spouse Signature   | _____<br>Date |
| _____<br>Parent 1 Signature         | _____<br>Date | _____<br>Parent 2 Signature | _____<br>Date |
| _____<br>Authorized School Official |               |                             | _____<br>Date |