



3441 Mountain Empire Road, Big Stone Gap VA 24219
fa@mecc.edu; 276-523-7470
Godwin Hall FOX Central, Monday – Friday; 8:00 AM – 4:30 PM

Instructions for Completing Reconsideration Form (PJ)

The purpose of this form is to allow the student and/or parent(s) to submit information that will assist the Financial Aid Office in determining the student's eligibility for financial assistance. Documentation **in writing** of changes in financial circumstances resulting from one or more of the following conditions should be provided:

- **Divorce or separation;**
- **Retirement;**
- **Death of a family member;**
- **Natural disaster;**
- **Loss of employment, significant reduction in income or benefits;**
- **Illness or injury resulting in unusually high medical expenses not covered by insurance;**
- **Other circumstances that may have caused a loss of income.**

The information submitted on this form will be evaluated to determine if allowable adjustments can be made to present a more realistic picture of the family's ability to contribute to the cost of education. Adjustment of awards is subject to the availability of funds.

To address any substantial changes in your family's financial situation this form must be completed to evaluate your projected income from **July 1, 2024 to June 30, 2025**. To assist in the process of reconsideration, you should provide as many applicable items from the following list as pertains to your situation (or that of your parent(s)):

- **If the linking tool to the IRS was not used on the FAFSA you must provide signed 2022 Federal Income Tax Returns or a **2022 IRS Tax Transcript** for anyone whose information was used to complete the FAFSA.**
- **Year-to-date earnings (last 3 pay stub for you and/or your spouse and/or parent(s))**
- **Layoff notice or letter on company letterhead from employer stating the last date worked.**
- **Unemployment eligibility determination (V.E.C Form B-30)**
- **Workers Compensation determination**
- **Retirement benefits notification**
- **Veteran's benefits notification (non-educational)**
- **Social Security Disability Benefits Statement (for reporting purposes)**
- **Itemized list of medical expenses paid by you (not covered by insurance) in 2023 or 2024 (Note: These expenses must exceed 11% of the applicable income protection allowance (IPA) built into the formula for determination of a student's expected family contribution (EFC) and remaining student need.)**

MECC RECONSIDERATION (PJ) FORM 2024-2025

Student Name: _____

ID: _____

Provide an explanation of the special circumstances which resulted in a change in your financial situation. Be as specific as possible and provide documents to verify the change.

I (We) affirm that the information submitted is correct and complete and represents my/our best estimate of my/our projected financial situation. I (We) certify that the Financial Aid Office will be notified if circumstances change.

Student's Signature

Date

Parent's Signature

Date

You can submit this Reconsideration Form and supporting documents to the Financial Aid Office in person or by emailing to fa@mecc.edu after the dates listed below.

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|-------------------|--|
| July 15, 2024 | Students not enrolling in classes until the Fall 2024 semester |
| November 15, 2024 | Students not enrolling in classes until the Spring 2025 semester |
| April 15, 2025 | Students enrolling in classes during the Summer 2025 semester |

It is recommended that you contact the financial aid office to schedule an appointment with one of the financial aid advisors. We can be reached by email at fa@mecc.edu or by calling 276-523-7470.