2013-2014 APPEAL FOR SPECIAL CIRCUMSTANCES FORM

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

The 2013-2014 FAFSA requires submission of 2012 income. If you, your spouse (if married), or your parent (if dependent) have experienced a significant decrease in income, you may file this appeal. Standard living expenses/bills are not reasons for consideration of this appeal. Submitting this appeal does not guarantee approval or increase your eligibility for financial aid. You will receive a written response regarding the outcome of this appeal.

Please complete the following steps and attach all required documentation as outlined below for the following person(s):

Student/Spouse ☐   **Parent(s) (for dependent student)** ☐

☐ **Step 1:** Complete a 2013-2014 FAFSA application and submit all requested forms for your 2013-2014 financial aid file.

☐ **Step 2:** Submit Verification documents (**Verification Worksheets** available on our website)

a. If independent, complete the **2013-2014 Independent Verification Worksheet** and attach a copy of you/your spouse's (if married) 2012 IRS Tax Return Transcript even if you used the IRS Data Retrieval Tool.

b. If dependent, complete the **2013-2014 Dependent Verification Worksheet** and attach a copy of you and your parent's 2012 IRS Tax Return Transcript even if you used the IRS Data Retrieval Tool.

c. If submitting this appeal after January 1, 2014, provide copies of 2013 IRS Tax Return Transcript and 2013 W-2's

☐ **Step 3:** Select the circumstance(s) that pertains to you by checking the box and submitting applicable documentation.

☐ **For loss of employment submit:**

➢ Copy of notice of separation from the employer(s) showing employment status and date of termination or reduction in hours
➢ Current proof of year-to-date gross earnings and any additional benefits paid (e.g. severance pay, vacation pay, retirement benefits, etc.)

☐ **For loss of untaxed income or benefits submit:**

➢ Copy of termination notice from the granting agency/company, court order, or document from caseworker
➢ Current proof of year-to-date benefits received

☐ **For separation, divorce, or death submit:**

➢ A copy of death certificate in case of death of a parent/spouse
➢ Documentation demonstrating loss of income due to separation, divorce, or death

☐ **For one-time income submit:**

➢ A copy of documentation from an employer, the court, or agency to support your written statement
➢ If rollover into a Roth IRA, a statement from the investment company that indicates the amount converted to the IRA

☐ **For out-of-pocket medical expenses paid submit:**

> ➤ Proof of payment of unusual/unexpected medical expenses paid out-of-pocket that insurance did not cover/reimburse. (Copies of receipts or cancelled checks must accompany billing statements. Billing statements must clearly indicate portions that have been paid by your insurance or other agency.)

☐ **Step 4:** Attach a signed written statement from the person(s) experiencing a decrease in income

☐ **Step 5:** Please check the reason(s) for your appeal and attach all required documentation as outlined above.

Student/Spouse:
☐ Loss of my/my spouse's employment
☐ Loss of my/my spouse's untaxed income or benefits
☐ Separated after FAFSA was filed
☐ One-time income received in 2012
☐ Significant out-of-pocket medical expenses
☐ Other (attach explanation)

Parent (for dependent student):
☐ Loss of parent(s) employment
☐ Loss of my parent(s) untaxed income or benefits
☐ Separated after FAFSA was filed
☐ One-time income received in 2012
☐ Significant out-of-pocket medical expenses
☐ Other (attach explanation)

Please provide year-to-date income and projected income for 2013 for all applicable individuals.

Projected 2013 Income (Do not leave anything blank)	Student	Spouse (if applicable)	Mother (if applicable)	Father (if applicable)
Wages, salaries, tips (earnings from work)	$	$	$	$
Unemployment	$	$	$	$
Severance Pay	$	$	$	$
Worker's Compensation, Disability	$	$	$	$
Child Support	$	$	$	$
Social Security Benefits	$	$	$	$
Cal Works/TANF	$	$	$	$
Cash Assistance from family, friends, etc.	$	$	$	$
Other Income **Source:**	$	$	$	$
Total year-to-date income plus proof of projected 2013 income	$	$	$	$

Each person signing this form certifies that all the information reported on it is complete and correct.

_____   _____
Student's Signature   **Date**

_____   _____
Parent's Signature (if applicable)   **Date**

FOR OFFICE USE ONLY ☐Approved ☐Denied	By: _____ Date:_____