



Financial Aid Appeal Process 2012-2013

What is it?

The appeals process allows the Financial Aid Office to consider making changes or revisions to the FAFSA based on recent changes in circumstances. These circumstances may include a decrease of income, change in family size, loss of assets, unusual expenses, etc. Please review the appeal conditions listed on the attachments. Complete the condition(s) that apply to you. Make sure you provide all the requested information and submit the documentation indicated for the specific condition.

Initiation of Appeals

Appeals can be initiated by completing the attached worksheet and submitting the required documentation. Once your appeal is received and the situation has been documented, a financial aid officer will review it and notify you of the result.

The changes made by the financial aid officer may or may not result in increased financial aid.

Depending upon availability and certain State deadlines, you will be re-considered for Federal and State funds including: Federal Pell Grant, Federal Supplemental Educational Opportunity Grant, Federal Student and Parent PLUS Loan Programs and Tuition Aid Grant.

Additional Documentation

In order to make changes to a student's financial aid information, documentation of the unusual circumstances must be submitted. All required documentation is listed along with each appeal condition.

All appeals and documentation must be submitted by April 1, 2013 for the 2012 - 2013 academic year.

Rowan University
Financial Aid Office

APPEAL CONDITIONS AND REQUIRED DOCUMENTATION

⇒ **Loss of Employment** - You, your spouse or a parent who earned money in 2011 but has lost his/her job for at least 6 weeks during 2012.

Please indicate: Name of unemployed person: _____

Circle relationship: Student Spouse Parent
Date of Unemployment: _____ Date Unemployment Benefits Began: _____

Also, please submit to our office the following required documents:

1. Copy of Notice to Claimant of Benefit Determination received from unemployment office that indicates weekly amount of unemployment benefits
2. Copy of last paystub(s) from all sources for unemployed individual that includes year-to-date income earned
3. A signed copy of 2011 Federal Income Tax Return Form 1040
4. 2011 W2 forms for the affected wage earner

If not currently receiving Unemployment Benefits, please explain why.

Please submit to our office the following documents:

1. Denial of Unemployment Benefits with explanation
2. Please provide date of lost of Unemployment Benefits and proof of loss of benefits
3. Copy of last paystub for unemployed individual that includes year to date income
4. A signed copy of 2011 Federal Income Tax Return Form 1040
5. 2011 W2 forms for the affected wage earner

⇒ **Change in Income** - Changes in income may include retirement, disability, under employment, etc. For instance, you, your spouse or a parent who earned money in 2011 but are but is not able to earn money the usual away full time for at least 6 weeks or are earning significantly less than you/they did in 2011.

Please indicate: Name of Affected person: _____
Circle Relationship: Student Spouse Parent

Explain the reason why less income is anticipated

The following documents are required for **all** Change in Income Appeals:

1. Year-to-date pay stubs from all sources of affected person
2. A signed copy of your 2011 Federal Income Tax Return Form 1040

⇒ **Appeal due to Retirement**

Date of Retirement: _____

Additional documentation required:

1. Proof of amount of pension benefit, if applicable
2. Proof of amount of monthly Social Security Benefits

⇒ **Appeal due to Disability**

Date of Disability: _____

Is the Disability Permanent? Yes or No

Date Disability payments began: _____

If yes, monthly amount of Social Security

Weekly amount of disability: _____

Benefit? _____

Additional documentation required:

1. Proof of amount of monthly Social Security Benefits
2. Proof of any additional disability payments

Student Name _____ Banner ID _____

⇒ **Elementary & High School Tuition paid** - You or your parent will pay tuition for **other** children to attend a private or parochial school in the **2012/2013** school year.

Please indicate: Name of child for whom tuition is being paid _____
Name of school receiving the payments _____
Annual amount of tuition for each child _____

Also, please submit to our office:

1. The term bill for the most recent 1213 term for each child or tuition expenses on the school's letterhead
2. A signed copy of your 2011 Federal Income Tax Return 1040

⇒ **Family Situation Change** - Your family income has changed due to a separation, divorce or death in the family.

Please indicate: Name of affected person: _____
Circle relationship: Student Spouse Parent

Date of change: _____

Explanation of how this affects the family's income

Also, please submit to our office:

1. Documentation of the situation change
2. Monthly benefits received – if any
3. A signed copy of your 2011 Federal Income Tax Return 1040

⇒ **Dependency Override** - You do not meet any of the conditions to be considered an independent student but you have exceptional circumstances such as having moved out of your parents' home due to an unsafe home environment.

Please indicate: General circumstances

Date circumstances began _____

Also, please submit to our office:

1. Independent 3rd party documentation from a social service agency, police, clergy or a counselor.
2. A copy of your 2011 Federal Income Tax Return 1040
3. Explanation of how you are meeting your expenses

Student Name _____ Banner ID _____

⇒ **Medical Expenses NOT Covered by Insurance** – Include health insurance premium payments such as COBRA

Please indicate: Reason for higher than normal medical expenses

Also, please submit to our office:

1. Schedule-A of your 2011 Federal Income Tax Return 1040
2. A signed copy of your 2011 Federal Income Tax Return 1040
3. Proof of health insurance payments

⇒ **Loss of Benefits** - You, your spouse or a parent who received social security benefits or some untaxed income or benefit have/has totally lost that benefit.

Please indicate: Type and amount of lost benefit: _____

Also, please submit to our office:

1. Copy of letter/notice from the agency that has terminated the benefits
2. A signed copy of your 2011 Federal Income Tax Return 1040

⇒ **Non-recurring income** - You, your spouse or a parent received income in the year 2011 and are unlikely to receive it again; for instance, one-time pension withdrawal, severance pay, etc.

Please indicate: nature and amount of income

Explanation why it is not reasonable to expect the income to repeat next year

Also, please submit to our office:

1. A signed copy of your 2011 Federal Income Tax Return 1040

Student Name _____ **Banner ID** _____