

INDIANA UNIVERSITY SOUTHEAST

Parent in College Notification

Dependent Undergraduate Students Only

2008-2009 Academic Year/Summer

Office of Financial Aid
Indiana University Southeast
4201 Grant Line Road
University South 105
New Albany, IN 47150
(812)941-2246 Fax (812) 941-2546
Web site: <http://www.ius.edu/financialaid>
OneStart: <http://onestart.iu.edu>

Purpose: The FAFSA does not allow students to include parents working toward a degree and enrolled at least half-time in the number of family members attending college. However, the financial aid office can make this adjustment for the student if doing so will improve the student's financial aid package.

Requirements: The student must have submitted a FAFSA for the 2008/2009 academic year. **You must submit this form, along with all required additional forms and documentation, to the address given above.**

Notification: Results of your appeal and any requests for additional information will be sent to the student's IUS email account only.

Deadline: Appeals must be submitted no later than 30 days before the last day of finals of the semester in which you are currently enrolled for loans to be adjusted for the current semester as well as any future semesters within this academic year. Incomplete or late submission of this form and documentation may result in denial of the appeal. Federal grants can be adjusted for previous semesters within the year, however state grant eligibility will not change.

Process: Appeals are reviewed and if approved the parent's # in college will be increased accordingly, any additional financial aid will be awarded and the student notified by e-mail of the result. Appeals may be closed without a ruling if the requested changes would not affect the student's financial aid package. Appeals will be denied if the student did not provide sufficient documentation to support their claim, missed the deadline, or if their claim did not meet federal guidelines for approval.

Student Name (print): _____ University ID: _____
Last First

Street Address: _____ Last 4 digits of SSN _____

City/State/Zip: _____ Student Phone: _____ IU Southeast E-mail: _____

I give permission to the Office of Financial Aid to verify any information I provide on this form. I certify that all of the information provided on this form is correct to the best of my knowledge. I understand that if I purposely give false or misleading information on this form, I am liable for cancellation or repayment of all or part of my financial aid.

Student Signature: _____ Date: _____

Parent(s) enrolled at least half-time as a degree-seeking student for Fall 2008 and/or Spring 2009. You must provide a copy of the parent's transcript and documentation of enrollment and degree status *if the parent is not an IU Southeast student*. Only the parent and/or step parent whose information was provided on the FAFSA can be considered.

Which parent(s) are enrolled? father mother

Parent name: _____ Social Security #: _____

School parent is attending: _____

School Address: _____ City/State/Zip: _____

Degree sought: _____

If both parents qualify please complete the following:

2nd parent name: _____ Social Security #: _____

School parent is attending: _____

School Address: _____ City/State/Zip: _____

Degree sought: _____

I agree to notify the IU Southeast Office of Financial Aid within 30 days if the above-named parent drops below half-time status during the semester.

Student Signature: _____