

INDIANA UNIVERSITY SOUTHEAST

Special Circumstances Appeal Form Parent and Dependent Student

2008-2009 Academic Year/Summer – Undergraduate Only

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 student is dependent if parent financial information was required on the student's FAFSA. If there are special circumstances that might affect the student's need for financial aid, complete only those sections that apply to the parent(s) or student. Only consider the parents and step parents whose information was required on the FAFSA. If you feel you have special circumstances that are not included on this form, please contact our office. Do not make changes or add to this form. Students with a parent in college or who wish to increase their budget for tuition, books, mileage, computer purchase or other additional educational expenses, or additional living or personal expenses such as childcare should submit the **Budget Appeal or Parent in College** form.

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.** Your FAFSA information will be verified and corrected if necessary prior to consideration of your appeal.

Notification: Results of your appeal and any requests for additional information will be sent to the student's IU Southeast E-mail account only.

Deadline: Appeals and all required documentation must be submitted **no later than 30 days before the last day of finals** of the semester in which you are currently enrolled. Incomplete or late submission could result in a denial of this appeal.

Process: Appeals are reviewed by committee and are subject to federal guidelines. If approved, changes are submitted to the U.S. Department of Education and financial aid will be adjusted. Appeals may be closed without a ruling if the requested changes would not affect the student's financial aid package.

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

Street Address: _____ Last 4 digits of SSN _____

City/State/Zip _____ Student Phone _____ E-mail: _____@ius.edu

Parent Name(s): _____

Parent(s) Phone: _____ Parent(s) E-mail: _____

I give permission to the Office of Financial Aid to verify any information I provide on this form. I understand that this verification will include a request for my tax documents. 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/my child's financial aid.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

Section 1 – Summary of Student's Request

Please summarize below the specific adjustments you are requesting and the involuntary and/or extraordinary circumstances that led to your situation.

Section 2 – Required forms and documents

Student Name: _____

Parent and/or student must provide ALL of the following documents (Worksheets can be printed at www.ius.edu/financialaid/forms.) Additional documents may also be required.

- 2007 Dependent Student Verification Worksheet
- 2007 Untaxed Income/Income Exclusion (ABC) Worksheet (include copy of social security benefit statement or 1099 if applicable)
- Signed copies of student's 2007 tax return and W-2's
- Signed copies of parent(s) 2007 tax return and W-2's

Section 3 – Check and complete all that apply. Completing one or more of the following choices may allow us to adjust the parent and/or student contribution as determined by the FAFSA. Adjustments do not guarantee that the student will become eligible for additional financial aid.

Parent(s) and/or student expect a significant involuntary decrease in income from 2007 to 2008. Please note that changes in employment must be involuntary and 10 weeks must have passed since the date of employment change before you apply for an income adjustment. Person(s) who lost income: father mother student

Documentation:

- Last pay stub of former job
- Documentation that the job change was involuntary and on what date it took effect
- Most recent pay stub of new job and documentation of start date, and/or
- Unemployment Benefit Statement and/or Disabilities Benefit Statement

Parent(s) and/or student involuntarily lost all or a portion of their Social Security benefits or other untaxed assistance or income reported on the FAFSA. Person(s) who lost benefits: father mother student

Documentation: Benefit statement, 1099 or letter detailing loss of benefits showing the name of the beneficiary, the date the benefit ended or changed, and the monthly amount received before and after the reduction or termination of benefits.

Family has incurred extraordinary medical costs during 2007.

Documentation: Proof of all medical and/or dental expenses paid during 2007, including insurance premiums.

If you filed a federal 1040 tax return and you itemized your tax deductions, the amount listed on your 1040 Schedule A form can be used and a copy of this form will be sufficient evidence. If you did not itemize, provide an estimate of your expenses below. A simulation will be run to determine if your expenses are high enough to make a difference in your aid and if so will notify you of the documentation we will require. **Estimated medical expenses:** _____

Family has incurred extraordinary non-reimbursed living expenses during 2007 due to a natural disaster. Please provide an itemized statement showing expenses incurred and payments made in 2007 as well as documentation of the circumstance.

Documentation:

- Insurance claim/denial
- Receipts for damage and repair costs as well as extra living expenses

Parents have become separated, divorced or widowed since filing the FAFSA.

Parent became separated divorced widowed on: (date) _____

Who is the surviving parent, or which parent will be providing more than 50% of the student's support or is the parent with whom the student most recently lived or will be living? father mother

Is this parent now remarried? _____ If so, when did this parent remarry? _____ (date)

Please provide documentation of the date noted above and any alimony or child support agreement.

Complete the Untaxed Income Worksheet (Section 2) based only on the student and the parent noted above. If any assets reported on the student's FAFSA application have been split as a result of a divorce settlement, please provide a copy of the asset split agreement and documentation of values as of the above date per the split agreement. Note the total expected child support payments for the year (for any child in the household) on the parent's column of the Untaxed Income/Income Exclusion Worksheet.