



## 2021-22 Reconsideration of Need Appeal Form

STUDENT NAME \_\_\_\_\_ STUDENT ID \_\_\_\_\_

A reconsideration of need appeal is appropriate when the amount of income that you, your spouse, or your parent(s) reported on your FAFSA has changed considerably due to a documentable special circumstance that occurred.

**Deadline for appeal:**

First Monday in August for students starting in the Fall term or the first Monday in December for students starting in the Spring term.

**Your appeal will not be reviewed until the following documentation has been received and processed by the Financial Aid Office.**

(Additional documentation/clarification may be requested by the Financial Aid Office.)

- 1) 2021-22 FAFSA application
- 2) Signed copy of 2019 Federal tax return including all schedules
- 3) 2021-22 Household Size Verification Form
- 4) 2021-22 Asset Form

Please check the option(s) that best describe(s) your situation	Documentation Required
_____ My own, my spouse's, or my parent(s)' employment income has changed considerably	<ul style="list-style-type: none"> <li>▪ Personal statement detailing the current situation and the prospects for employment changes in the near future.</li> <li>▪ Documentation verifying the change in employment income such as a termination or layoff notice (if applicable).</li> <li>▪ Last pay stub showing year to date earnings and a pay stub from new employment (if applicable).</li> <li>▪ Documentation of all unemployment benefits if not reported on tax return (if applicable).</li> <li>▪ You may also be asked to provide a copy your 2019 W-2s/1099 forms, and/or your 2020 tax returns, including all schedules.</li> </ul>
_____ I, my spouse, or my parent(s) have/has unusually high unreimbursed, non-elective medical or dental expenses	<ul style="list-style-type: none"> <li>▪ Personal statement detailing your circumstances.</li> <li>▪ Medical Expense form with supporting documentation.</li> <li>▪ A copy of your 2020 tax return, including schedules, may be requested.</li> </ul>
_____ I, my spouse, or my parent(s) lost untaxed income or benefits such as child support	<ul style="list-style-type: none"> <li>▪ Personal statement explaining circumstances.</li> <li>▪ Documentation showing amount received.</li> <li>▪ Documentation showing the benefit is no longer being received and date is ended.</li> </ul>
_____ I, my spouse, or my parent(s) have/has elementary or secondary tuition	<ul style="list-style-type: none"> <li>▪ Personal statement addressing the reason the student must attend a private institution vs. a public institution.</li> <li>▪ Receipts showing amounts of elementary/secondary tuition paid and for whom the tuition was paid for the calendar year.</li> </ul>
_____ I, my spouse, or my parent(s) have a loss of income and/or assets due to reasons beyond their control (i.e. death, natural disaster, etc.)	<ul style="list-style-type: none"> <li>▪ Personal statement explaining circumstances.</li> <li>▪ Relevant documentation showing unreimbursed loss (i.e. death certificate, documentation from insurance company showing fire loss not covered, etc.)</li> </ul>
_____ I, my spouse, or my parent(s) have/had a conversion of traditional IRAs to Roth IRAs in reported tax year	<ul style="list-style-type: none"> <li>▪ Signed personal statement describing reason for request.</li> <li>▪ Copy of 2019 Federal income tax return showing conversion.</li> </ul>

Only complete and signed appeals will be considered. Appeals are reviewed on a case by case basis and may take 3 weeks to process. The approval of an appeal does not guarantee additional financial aid. Appeal decisions will be emailed to student's [Fort Lewis College email](#). In order for us to discuss or confirm information with the parent listed below, related to this request, a FERPA release will need to be on file. All decisions are final.

I/we certify that all information I/we included in this appeal is true and accurate.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Spouse/Parent Signature (if applicable): \_\_\_\_\_ Date: \_\_\_\_\_