

2023-2024 Financial Aid Appeal for Special Circumstances

Purpose of Appeal

The Higher Education Act and associated federal regulations give financial aid administrators the authority to exercise professional judgment to account for a student’s special circumstances that differentiate their current financial or family situation from that reported on the 2023-2024 Financial Aid application, either the Free Application for Federal Student Aid (FAFSA) or the California Dream Application (CADAA). By submitting the Financial Aid Appeal form, a student is requesting consideration for a specific change in their financial or family’s circumstances.

Before a special circumstance can be considered, you must have already filed your 2023-2024 Financial Aid application. For most cases, approved appeals will only result in a change to your eligibility of federal and/or state financial aid. Adjustments to a financial aid award from submitting an appeal are neither guaranteed nor immediate and depend on funding availability.

General Instructions

The situations listed on this form are those situations that Notre Dame De Namur University Office of Financial Aid will review for possible changes in financial aid eligibility. If you were selected to complete verification, this must be completed before we can exercise professional judgement. In most cases, you may be required to provide tax return transcripts and/or supporting documentation for verification purposes.

Forms received without the appropriate signature(s) or missing information are considered incomplete and will not be reviewed. We will send notification of the outcome of your appeal once the review is complete.

Section A – Explanation of Special Circumstances:

You must submit a detailed statement to explain the change in your financial or family’s circumstances. Make sure to sign and date your written statement. If you are a dependent student, your parent must also sign and date the statement.

Section B – Special Circumstances for Consideration:

Appeals approved for these reasons may result in changes to Federal, State or University Aid eligibility. Please review and indicate which special circumstance applies to you. Complete copies of documentation must be submitted along with this form to review your request.

Special Circumstance	Required Documentation
<input type="checkbox"/> Loss of employment	<ul style="list-style-type: none"> • A letter from your former employer on company letterhead detailing your termination, reason for separation and amount of any benefits or severance pay • Copy of most recent pay stub with year-to-date gross earnings • Unemployment benefit or denial letter
<input type="checkbox"/> Reduction of employment	<ul style="list-style-type: none"> • A letter from employer on company letterhead detailing your reduction of time, date reduction began and reason for reduction • Copy of most recent pay stub with year-to-date gross earnings
<input type="checkbox"/> Excessive medical or dental expenses	<ul style="list-style-type: none"> • Documentation (e.g., receipts for co-pays, doctor bills, hospital bills or prescription bills, etc.) detailing the out-of-pocket medical or dental expenses not covered by insurance • Copy of most recent pay stub with year-to-date gross earnings
<input type="checkbox"/> Death of parent or spouse	<ul style="list-style-type: none"> • A copy of the death certificate or obituary • Copy of most recent pay stub with year-to-date gross earnings
<input type="checkbox"/> Divorce or Separation	<ul style="list-style-type: none"> • A copy of the divorce decree or separation agreement • A signed statement to explain change in marital status, including all relevant dates such as date of divorce or separation and date moved into separate residences • Documentation of living in separate residence (e.g., utility bills, lease, etc.) • Copy of most recent pay stub with year-to-date gross earnings

Section C – Income and Benefits for 2022: Please submit your 2022 US Federal IRS Tax Transcript and W-2 statements.

OR

Section C – Projected Income and Benefits for 2023: Income expected to be earned from January 1, 2023, through December 31, 2023

You must provide the received and/or expected income for all categories listed below. If no income is received and/or expected for a category, use "0" or "N/A" - do not leave any blanks. In addition to the required documentation listed on page 1, you must submit proof of all income figures provided below (e.g., for wages, supply your most recent paystub).

Source of Income	Student	Student's Spouse	Father/Stepfather	Mother/Stepmother
Wages, Tips, Salary	\$	\$	\$	\$
Severance Compensation	\$	\$	\$	\$
Unemployment Benefits	\$	\$	\$	\$
Interest/Dividend Income	\$	\$	\$	\$
Retirement Benefits	\$	\$	\$	\$
Pensions and/or Annuities	\$	\$	\$	\$
Social Security Benefits	\$	\$	\$	\$
Child Support Received	\$	\$	\$	\$
Welfare Benefits	\$	\$	\$	\$
Alimony	\$	\$	\$	\$
Disability Benefits	\$	\$	\$	\$
Workers Compensation	\$	\$	\$	\$
Other:	\$	\$	\$	\$
Total of all income:	\$	\$	\$	\$

Section D – Statement of Certification:

By signing below, I certify that all the information provided on this form and attached documentation is accurate and complete to the best of our knowledge. If requested, I agree to provide further documentation to substantiate the information provided. I understand that all special circumstances are reviewed on a case-by-case basis and this written appeal may not result in change or an increase in financial aid.

Student's Name: _____ Student's ID: _____

Address: _____

City: _____ State: _____ Zip code: _____

Phone: (_____) _____ Email: _____

Student's Signature: _____ Date: _____

Parent's Name: _____ (if student is dependent)

Parent's Signature: _____ Date: _____

Have you provided the following?

- Written detailed statement of circumstances Tax Transcript(s), W-2(s) All required documentation as indicated on page 1
 Supporting Documentation for income sources listed on Page 2 Appropriate Signatures, Student Name, and NDNU ID on all documents