

2018-2019 FINANCIAL AID APPEAL AND SPECIAL CIRCUMSTANCE FORM

Student Name **LMU ID**

Students whose family experienced a change in financial circumstances separate from what was reported on the FAFSA may be eligible for a re-calculation of their federal, state, or institutional aid eligibility based on 2017 income or estimated 2018 income. In order to be considered for a special circumstances calculation, students and their families must meet specific guidelines and provide documentation of the change.

Submission of an appeal does not guarantee an increase to the financial aid award. Further, an approved appeal may only result in an increase to federal or state aid programs. In most cases, changes will result in additional employment and/or loan eligibility.

Incomplete requests will not be considered.

Section I-Special Circumstance Reason (s):

Required Documentation:

- Complete the Free Application for Federal Student Aid (FAFSA)
- Submit a 1 page letter detailing the reason for submitting the appeal
- We will request parent and/or student tax data, if necessary via the student's PROWL account or applicant portal
- Provide documentation supporting your special circumstance

Reduction of Income:

Complete this section below, complete Section II on pages 2-3, and provide supporting documentation such as a termination letter, severance benefit statement, unemployment benefit statement, recent pay stub, etc."

Unemployed Reduced Income Parent(s) Student and/or spouse Date occurred:

Significant reduction in income Parent(s) Student and/or spouse Date occurred:

Divorce/ Separation:

Complete Section II, and provide supporting documentation such as an explanation of separation of assets and anticipated child support and/ or alimony, etc. If separated, must provide proof of separate address, such as utilities. If divorced, provide copy of divorce decree.

Divorce date: Separation date:

Medical Expenses - Parent(s)

Uninsured (out of pocket) medical/dental expenses: Paid in 2017 \$ **OR** Paid in 2016 \$

Medical Expenses - Student and/or spouse

Uninsured (out of pocket) medical/dental expenses: Paid in 2017 \$ **OR** Paid in 2016 \$

Provide documentation such as (a) copy of 1040 schedule A if medical/ dental expenses were itemized; or (b) an itemization of medical/ dental expenses with total and attach receipts or statements of out of pocket payments. Total must exceed 11% of total income for consideration.

Private Elementary/ Secondary Tuition Expenses: Paid in 2017 \$ **OR** Paid in 2016 \$

(Paid for student's younger siblings)

Provide documentation such as receipts or statement from school stating total amounts paid.

Elder Care: Paid in 2017 \$ **OR** Paid in 2016 \$

Provide documentation of expenses paid such as nursing home contracts, statement of payments, receipts.

Other Expenses (please explain below): Paid in 2017 \$ **OR** Paid in 2016 \$

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Section II - Provide either 2017 Actual Income or 2018 Projected Income. The Financial Aid Office may request supporting tax information from you via the student's PROWL account or applicant portal--If income for a section is 0, enter 0; do not leave blank.

Actual 2017 Income (TAXABLE INCOME EARNED FROM JANUARY 1, 2017 THROUGH DECEMBER 31, 2017) for Student and/or Spouse, Parent 1 and/or Parent 2.

Projected 2018 Income (TAXABLE INCOME EXPECTED TO BE EARNED FROM JANUARY 1, 2018 THROUGH DECEMBER 31, 2018) for Student and/or Spouse, Parent 1 and/or Parent 2.

	Student and/or spouse	Parent 1 (Father/ Stepparent)	Parent 2 (Mother/ Stepparent)
1. Wages	\$	\$	\$
2. Severance Compensation	\$	\$	\$
3. Unemployment Benefits	\$	\$	\$
4. Interest/Dividend Income	\$	\$	\$
5. Other Taxable Income¹	\$	\$	\$
Total (1-5)	\$	\$	\$

	Student and/or spouse	Parent 1 (Father/ Stepparent)	Parent 2 (Mother/ Stepparent)
1. Tax Deferred Payment to Retirement	\$	\$	\$
2. IRA/ Keogh Deduction	\$	\$	\$
3. Child Support Received	\$	\$	\$
4. Tax Exempt Interest	\$	\$	\$
5. Untaxed IRA Distribution (exclude rollover)	\$	\$	\$
6. Untaxed Pension	\$	\$	\$
7. Other Untaxed Income²	\$	\$	\$
Total (1-6)	\$	\$	\$

¹ Must include business income/wages, capital gains, taxable pension and annuities, rental income, royalties, partnerships, S corporations, trusts, alimony, farm income, taxable IRA distributions and social security benefits, etc.

² Must include deductions and payments to self-employed SEP, SIMPLE, Keogh, etc., tax exempt interest and dividends, untaxed portions of IRA distributions (exclude rollovers), untaxed pensions, housing, food, and other living allowances (Clergy, etc.), veterans noneducational benefits, workers compensation, disability payments, unofficial spousal support, etc.

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Section II Continued: Asset Information: (If dollar amount for a section is 0, enter 0; do not leave blank)

AS OF TODAY, WHAT IS THE TOTAL BALANCE OF:

	Student and/or spouse	Parent 1 (Father/ Stepparent)	Parent 2 (Mother/ Stepparent)
1. Cash	\$	\$	\$
2. Savings (include trust funds) and Checking	\$	\$	\$
3. Investments	\$	\$	\$
4. Business Income	\$	\$	\$

Providing the LMU Financial Aid Office with false information may result in a referral to the Office of Judicial Affairs and the U.S. Department of Education Inspector General. Violations of the Student Conduct Code are adjudicated according to the LMU Student Conduct Code found in the Community Standards.

Section III- STUDENT/PARENT CERTIFICATION:

SIGNATURE REQUIRED BY STUDENT (AND PARENT, IF STUDENT IS DEPENDENT)

I/We understand that the submission of an appeal does not release the student from the obligation of any current payment plan with Loyola Marymount University.

I/We understand that as there is no guarantee that an appeal will be approved.

I/We affirm that the information provided on this form and attached documentation is accurate and complete to the best of our knowledge. I/We also understand that any revision based on this appeal information does not guarantee the same adjustments will be made in future semesters and/or academic years.

Student Name	<input style="width: 95%; height: 25px;" type="text"/>		
Student Signature	<input style="width: 95%; height: 25px;" type="text"/>	Date	<input style="width: 80%; height: 25px;" type="text"/>
Parent Name	<input style="width: 95%; height: 25px;" type="text"/>		
Parent Signature	<input style="width: 95%; height: 25px;" type="text"/>	Date	<input style="width: 80%; height: 25px;" type="text"/>
Parent Email	<input style="width: 95%; height: 25px;" type="text"/>		

Phone: 310.338.2753
Fax: 310.338.2793

Mail: ATTN: APPEALS COMMITTEE
LMU Financial Aid Office
1 LMU Drive, Suite 270
Los Angeles, CA 90045

How to Submit this Form:

The Department of Education requires that documents containing personally identifiable information (PII) must be transmitted through secure means. This form cannot be submitted via email. You may mail or fax this form to the address or fax number listed to the left, or you may submit it as a PDF through our Secure Upload page available at financialaid.lmu.edu/upload

For Office Use Only:
RRAAREQ - APEAL at C or I
Nolij - Appeal/Special Circumstance

FAO Staff Initial _____
Date: _____

WARNING: If you purposely provide false or misleading information, you will be reported to the U.S. Department of Education where you may be fined, sent to prison or both. All forms and paperwork are property of Loyola Marymount University and will be kept and maintain with student's file.