

Financial Aid Office 2022-2023 Special Circumstances Appeal Form

You indicated that there has been a change of circumstance in your family's financial situation in the time since your Free Application for Federal Student Aid (FAFSA) was processed. Financial Aid Administrators have the authority to take into consideration unique family circumstances not reflected on the FAFSA. You must provide a detailed explanation for your appeal and submit non-returnable copies of your documentation to the Financial Aid Office. See below for requested documentation. When documentation is received, our office will determine if changes can be made to the FAFSA and evaluate your eligibility for additional financial aid. Submission of a Special Circumstances Appeal does not guarantee a change on the financial aid offer. Please allow 12 to 14 business days for review and processing after all documentation has been received.

Please contact the WWC Financial Aid Office at 828-771-2082 or finaid@warren-wilson.edu with questions.

Student Name: ______Student ID Number: ______

Email:

Section A - Please provide a detailed explanation of your change of circumstance. Be as specific as possible, including dates when applicable. You will also need to provide the additional documentation listed below depending on the circumstances that led to your appeal.

Phone:

Check Reason	Documentation Requested Checklist	
	 Who experienced a loss of employment? Father Mother Self Spouse (if married) Experienced loss of employment for a minimum of 12 weeks 	
Unexpected loss in employment	 2022-2023 Special Circumstances Appeal Form Detailed letter explaining your circumstances, including dates Copy of 2020 Signed Federal Tax Return if the IRS DRT was not utilized on the FAFSA Copy of 2021 Signed Federal Tax Return Copy of W-2's for 2020 Copy of W-2's for 2021 Letter from former employer(s) stating the last date of employment Copy of unemployment letter or signed statement that you did not or will not receive benefits Copy of last pay stub(s) from former employer(s) and current employer(s), if applicable. Copy of severance pay received if any 	

	 Who experienced a reduction in wages? Father Mother Self Spouse (if married)
	□ Experienced reduction of wages for a minimum of 12 weeks
Unexpected reduction in wages	 2022-2023 Special Circumstances Appeal Form Detailed letter explaining your circumstances, including dates Copy of 2020 Signed Federal Tax Return if the IRS DRT was not utilized on the FAFSA Copy of 2021 Signed Federal Tax Return Copy of W-2's for 2020 Copy of W-2's for 2021 Letter from former employer(s) stating reduction in wages
Loss or change in amount of child support, Social Security, or other benefits	 Person receiving the benefit: Parent Student 2022-2023 Special Circumstances Appeal Form Detailed letter explaining your circumstances, including dates Copy of 2021 Signed Federal Tax Return Copy of W-2's for 2021 for the person who received the benefit If benefit is terminated, provide documentation of monthly benefit amount and date of benefit termination If benefits are reduced, provide documentation of original amount, date of reduction, and reduced amount
Divorce or separation of parents or spouse	 2022-2023 Special Circumstances Appeal Form Detailed letter explaining your circumstances, including dates Copy of 2021 Signed Federal Tax Return Copy of W-2's for 2021 Copy of legal separation documentation, verification of separate households, or divorce decree
Death of parent(s) or spouse	 2022-2023 Special Circumstances Appeal Form Copy of death certificate or obituary <i>Note: The WWC Financial Aid Office may request tax documents</i>
Unusual medical expenses	 2022-2023 Special Circumstances Appeal Form Detailed letter explaining your circumstances, including dates Copy of 2020 Signed Federal Tax Return if the IRS DRT was not utilized on the FAFSA Copy of 2021 Signed Federal Tax Return Copy of W-2's for 2020 Student or Parent Copy of W-2's for 2021 Student or Parent Copy of Schedule A for parent and/or student Please submit verification of payment (e.g., cancelled checks, receipts, credit card statements) Remember that we can only count expenses that you have paid out of pocket. These can include medicine, mileage to and from the doctor or hospital, or necessary medical equipment. These expenses must be over 11% of your Adjusted Gross Income to be considered.

De-time taxable Income (IRA, Pension distribution, back- year Social Security Payments)	 Person who received a one-time, lump sum payment: Parent Student 2022-2023 Special Circumstances Appeal Form Detailed letter explaining your circumstances, including whether you plan to make a future withdrawal from an IRA, Pension, or 401K A detailed letter indicating what these funds were used for and the balance remaining Copy of 2020 Signed Federal Tax Return if the IRS DRT was not utilized on the FAFSA Copy of W-2's for 2020 for Student or Parent Documentation to identify the source(s) of the income Verification of payment and an itemized statement showing how the funds were spent (e.g. canceled checks, and receipts)
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Section B – Certification and Signature

By signing below, I certify that the information provided on this form is true and correct to the best of my knowledge. I understand that completing this form does not guarantee a change in my financial aid offer. I agree that if requested, I will provide documentation to support the information provided on this form. Finally, I understand that the decision is final and cannot be appealed.

Student Signature

Parent Signature (If Dependent Student)

NOTE: All documents must be uploaded in the student's Net Partner Account or faxed to the Financial Aid Office at 828-771-2030. Email submissions are not accepted in order to ensure the safety and security of personal information.

INTERNAL USE ONLY:	
Approved by:	_Date:
Approved by:	_ Date:

Date

Date