

Student Name:

Student ID:



### Special Circumstance Appeal Form 2024-2025

This form is used to request a reconsideration of your 2024-2025 financial aid award. Applications are considered incomplete without all of the required documentation. **All special circumstance appeals are required to have a detailed letter of explanation in addition to the supporting documentation.** If you have been selected for Federal Verification, your appeal cannot be processed for changes until verification is complete.

**Reasons for review of circumstances: (check only the box that applies)**

Change in Financial Circumstances	Documentation Required
Significant/Involuntary Reduction In Income - Student and/or Parent (For Example: Loss of Job, Child Support Reduction)	<ul style="list-style-type: none"> <li>• Signed detailed statement describing loss or reduction of income, include dates and all sources of income</li> <li>• Copy of applicable tax return transcripts and/or W-2's</li> <li>• Employer letter on letterhead reflecting last date of employment or DD-214</li> <li>• Proof of Unemployment benefits if applicable</li> <li>• Most recent paystub(s) that show year-to-date earnings</li> <li>• Notice of reduction/loss or court order of child support (include totals received)</li> </ul>
Change In Marital Status After FAFSA Filing - Student and/or Parent (For Example: Divorced, Widowed Or Death Of Parent/Spouse)	<ul style="list-style-type: none"> <li>• Copy of divorce decree/separation papers (if available) or copy of death certificate</li> <li>• Copies of final pay stub(s)</li> <li>• Documentation of any death benefits received (ex. Life insurance, social security, pension ect.)</li> </ul>
Out Of Pocket Medical and/or Dental Expenses That Exceed 11% of Household AGI	<ul style="list-style-type: none"> <li>• Provide bills/receipts and an itemized list with a total of all medical and/or dental expenses</li> </ul>
Other (For Example: One-time Taxable IRA Or Pension Distribution, Private Educational Expenses, Parent In College, Or Other Education Related Expenses)	<ul style="list-style-type: none"> <li>• IRS 1099-R (if applicable)</li> <li>• Receipts indicating private tuition or eligible educational expenses paid</li> </ul>

Certification Statement: I (we) certify that all of the information provided is correct. I (we) understand that additional information may be requested. I (we) understand that the appeal decision made by Capital University's financial aid office is final and cannot be appealed.

**STUDENT SIGNATURE:** \_\_\_\_\_ **DATE :** \_\_\_\_\_

**PARENT SIGNATURE (IF DEPENDENT STUDENT) :** \_\_\_\_\_ **DATE :** \_\_\_\_\_