



Special Circumstance Appeal Form

The Special Circumstance Appeal Form can be used if families have experienced special circumstances which merit recalculating the student's 2021-2022 financial aid eligibility based on either 2019 or 2020 income.

Before an appeal can be considered, the student's 2021-2022 Free Application for Federal Student Aid (FAFSA) must be on file with the Office of Student Financial Aid and the student must have received their official 2021-2022 Award Letter.

Student Last Name

Student First Name

Student ID

**You MUST attach the required documents (see center column below). You may keep this top page for your reference.
All documents should be turned in together in order to have your appeal processed in the most timely manner.**

Special Circumstance	Required Documents (All documents MUST be signed)	Reasons for Consideration (All documents MUST be signed)
All Appeals MUST Include: (Check one. If there are multiple reasons, turn in a form for each instance)	Signed written statement detailing the specifics of your circumstance	
	Submit a complete signed copy of your/spouse's 2019 and 2020 federal tax returns (including schedules)	
	If dependent, submit a complete signed copy of your parent(s) 2019 and 2020 federal tax returns (including schedules)	
	Submit copies of all W-2 forms for student/spouse and parent(s), where applicable	
Reduction in Income	Projected annual income and benefits form (see 2nd page of this form)	Reduction in Income during 2020 due to: *Must be unemployed for a minimum of 3 months *Termination / Layoff from job *Significant reduction in work hours *Retirement *Returning to school
	Retirement or unemployment benefits statement(s)	
	Last pay stub from all employers showing year-to-date earnings	
	Termination notice from employer, letter of resignation, or DD214	
One-Time Income	Projected annual income and benefits form (see 2nd page of this form)	*IRS or 401K distribution *Unusual capital gains *Losses due to natural disaster
	Proof of unusual circumstances that resulted in debt	
	Account statements from the financial institutions showing the balance	
Medical	Projected annual income and benefits form (see 2nd page of this form)	*Parent or student paid unusual medical expenses out of pocket which were not covered by insurances or already deducted on taxes. Charges not yet paid cannot be considered. If amount was itemized on a tax return (Schedule A) we cannot process a request.
	Explanation of benefits (EOB) statements	
	Proof of medical expenses incurred in the appropriate year which were not covered by insurance	
Death	Projected annual income and benefits form (see 2nd page of this form)	*Parent (if dependent) or spouse (if independent) passes away after the FAFSA has been filed.
	Copy of death certificate	
	Copy of death benefits	
Divorce / Separation	Projected annual income and benefits form (see 2nd page of this form)	*Parent (if dependent) or spouse (if independent) no longer residing in the household due to separation or divorce after the FAFSA has been filed.
	Copy of legal separation agreement or full divorce decree	
Marriage	Projected annual income and benefits form (see 2nd page of this form)	*Student gets married after the 2021-2022 FAFSA has been filed. *Marriage MUST happen prior to December 31, 2021.
	Copies of your/spouse's 2019 Tax Return Transcripts and 2019 W-2	
	Marriage certificate	
	For common law marriage: a benefits enrollment/change form with any necessary supporting documentation for dependent eligibility & enrollment (proof of joint checking account, insurance, or taxes filed jointly). Also a notarized statement confirming your marital status.	
Dependency Override	Two letters from professionals on letter head	*An abusive family environment (forms of domestic violence) *Abandonment by parents *Incarceration or institutionalization of both parents
	One letter from a relative	
	Police reports/court documents (if they exist)	



Special Circumstance Appeal Form

Student Last Name		Student First Name			Student ID		
Indicate type of appeal which you are submitting reconsideration under:	Reduction in Income	One Time Income	Medical	Death	Divorce/ Separation	Marriage	Dependency Override

2020 ANNUAL Income and Benefits Form— Please complete all fields. Enter “0” for any fields that do not apply.

Income Source	Student	Student's Spouse	Parent 1	Parent 2
Taxable Income — Please complete all fields. Enter “0” for any fields that do not apply.				
Wages, salaries, tips				
Interest Income				
Alimony Received				
Alimony Paid (enter as a negative number)				
Business Income				
IRA Distributions				
Pensions/Annuities				
Royalties, Partnerships, etc.				
Farm Income				
Unemployment Compensation				
Other Income (provide explanation)				
	Student/Spouse AGI		Parent(s) AGI	
Untaxed Income — Please complete all fields. Enter “0” for any fields that do not apply.				
Child Support Received				
Child Support Paid (enter as a negative number)				
Tax Deferred Payments to Pension & Retirement Funds				
Veteran's Noneducational Benefits				
Money received or paid on your behalf				
Other untaxed income (provide explanation)				
Housing, food & other living allowances (provide explanation)				
	Student/Spouse Untaxed		Parent(s) Untaxed	
Yearly Total	Student/Spouse Yearly Total		Parent(s) Yearly Total	

By signing your name below and submitting this form, you certify that this information is correct. Should any changes occur to this information, you understand that you must notify the Office of Financial Aid, Student Employment, and Scholarships in writing.

Please do not email sensitive information such as tax returns listing social security numbers or other personally identifiable information. You should always redact social security numbers, but always list the UCCS student ID number and student name on all documents submitted. UCCS Financial Aid provides a secure file upload system to submit your information and safeguard your personal data. Visit uccs.edu/finaid/upload for more information.

_____ Student Signature	_____ Parent Signature (if dependent on the FAFSA)
_____ Date	