



2020-2021 FINANCIAL AID ELIGIBILITY APPEAL FORM

Student's Name: _____ Student ID _____

This form should be completed when a family can document a significant change in financial circumstances, or if you believe there are special circumstances that were not included/considered on your initial aid application. You will be notified in writing regarding the outcome of your appeal after your information is reviewed by the Scripps Financial Aid Committee.

The completion of this form does not guarantee an adjustment to the student's award. Discretionary spending (i.e., consumer debt and car payments) cannot be considered in an appeal. Scripps College does not match financial aid awards from other colleges and universities. Failure to fully document all circumstances will cause a delay in the review of the information provided until full documentation is received. This form acts as a certification statement and instructional document of what you should submit for your appeal.

Part A. Check ALL that apply to you:

- Involuntary loss of employment or change of employment status for student or parent(s)
- One-time payment that created an unusual increase in income
- Divorce or separation of parents or for independent student and spouse
- Death of spouse or parent
- Loss of untaxed income (social security, pension, etc.)
- Unusual medical or dental bills not covered by insurance
- Documentation of annual secondary private school tuition
- Incorrect financial information provided on initial application
- Other: _____

Part B. If your circumstance includes a change in income, fill in the Parent Income and Expense Declaration Form .

Part C. Please attach the following:

1. A written letter explaining your change(s) in circumstance
2. Your 2018, 2019, and/or 2020 federal tax return(s), as available, with all schedules and W2s (check your financial aid portal for confirmation of receipt of previously submitted documents)
3. Documentation of your change in circumstance (see next page for a list of required documents for specific circumstances)

Part D. Please carefully read the following before signing this form:

Certification:

I/we understand that submission/review of this form does not guarantee a change in the student's financial aid eligibility. It is the student's responsibility to remain in good standing with the Student Accounts and Registrar's Offices. I/we affirm that the information provided in my appeal and the attached documentation is accurate and complete to the best of my/our knowledge. I/we understand that if any of the information used in my appeal changes, I must contact the financial aid office immediately in writing with the corrected information. I/we understand that future financial aid awards may be reduced if income estimates are significantly underestimated in my appeal. I understand that false statements or misrepresentations may be cause for denial, reduction, withdrawal or repayment of financial aid.

Student Signature: _____ Date: _____

Student Email: _____

Parent Signature: _____ Date: _____

Parent Email: _____

Best Phone Number to contact you: _____

Acceptable documentation for Part C:

1. Involuntary loss of employment, or change in employment status
 - Signed statement from the student/parent explaining reasons for unemployment
 - Year to date pay stubs showing all income earned from work for 2019. (Provide 2020 information if available.)
 - Documentation of all untaxed income received thus far in 2019. (Provide 2020 information if available.)
 - Termination letter and/or any documentation regarding severance pay
 - Documentation of any unemployment benefits, disability benefits or insurance payments being received or expected to be received.
 - Parent Income and Expense Declaration Form (available on the website).

2. Divorce or separation
 - Divorce – Copy of divorce decree (include custody and child support agreements).
 - Separation – Copy of legal separation document (include custody and child support agreements); or, if legal separation document is not yet available, a signed statement from your attorney or unrelated third party showing the date of separation.
 - Parent Income and Expense Declaration completed by both parents.

3. Death of a spouse or parent
 - Copy of death certificate or an obituary notice.
 - Documentation of proceeds of estate distributions including: inheritance, insurance, pensions and Social Security benefits that you have received or expect to receive.

4. Loss of untaxed income
 - Letter from the agency providing the benefits, detailing termination of benefits.
 - Statement from the agency that summarizes the amounts of the benefits already received.

5. Unusual medical or dental expenses not covered by insurance
 - Copy of Schedule A of the federal 1040 tax return form
 - If the Schedule A is not available or the expense was paid in the current year, an itemization of all expenses paid for each family member. Please provide the name of the family member, their relationship to the student, the reason for the expense, copies of canceled checks, or receipts showing amount paid with the statement from the insurance company showing expenses not reimbursed. Do not include amount incurred, but paid by insurance or not yet paid.

6. Private elementary or secondary school tuition
 - Tuition billing statement from the institution, including all financial aid and scholarships received

7. Other documentation/circumstances
 - Any relevant documentation which will support request for reconsideration

Please note: the Scripps Financial Aid Office reserves the right to request additional information not listed on this form if deemed necessary to support the request to reevaluate financial aid eligibility.