



Financial Aid & Scholarships Office

2009-2010 SPECIAL CIRCUMSTANCES APPEAL

STUDENT NAME: _____ SSN: _____

STUDENT ID#: _____ PHONE NUMBER: _____

CURRENT ADDRESS: _____

This form is to be used to document changes that have occurred in your or your family's financial situation for the current academic year. This form allows for a review of circumstances that were not considered when you completed the Free Application for Federal Student Aid (FAFSA). If your appeal is approved, the data that you provide on this form will be used in re-evaluating your eligibility for federal financial aid.

APPEALS WILL ONLY BE PROCESSED WITH THE APPROPRIATE DOCUMENTATION ATTACHED

PLEASE READ CAREFULLY - CHECK ALL THAT APPLY

If you were considered an "Independent" student when you completed the FAFSA, you and/or your spouse must meet at least one of the following special circumstances.

If you were considered a "Dependent" student when you completed the FAFSA, you and/or your parents must meet at least one of the following special circumstances.

Place a check mark next to the appropriate situation(s) listed below, then complete the corresponding required sections and attach all necessary documentation.

- Separation/Divorce/Death** The situation must have occurred after the FAFSA was filed. Complete Sections 1, 6, and 7.
- Reduction of Income** Expected income has changed due to unemployment, reduced wages, or a change in untaxed income and benefits. Please complete Sections 2, 6, and 7. *Adjustments will usually not be made for the dependent student who has experienced a loss in his or her income.*
- Unusual Medical and Dental Expenses** Unusual medical and/or dental expenses incurred that are not covered by insurance and in excess of 7.5% of the reported Adjusted Gross Income for 2008. Complete Sections 3 and 7.
- Elementary or Secondary School Tuition** Paid elementary or secondary tuition for dependent children. Complete Sections 4 and 7.
- Child Care Expense** Paid childcare for dependent children. Complete Sections 4 and 7.
- Repairs to Student's Vehicle** Repairs to student's vehicle for fall and/or winter semesters. Complete Sections 4 and 7.
- Required Books and/or Supplies** Books and supplies exceeding the standard allowance. Complete Sections 4 and 7.
- Personal Computer Purchase** Computer purchase for educational use. The cost of the PC (including printer and software) cannot exceed \$2,500 unless the student's academic unit sends documentation supporting the student's need for equipment that warrants additional costs. Complete Sections 4 and 7.
This addition can occur once per degree program.
- Dependency Exceptions** You are required to provide parent(s)' financial information on the FAFSA and extenuating circumstances prevent you from being able to obtain the data. Complete Sections 5 and 7.

5100 Rockhill Road 101 AC
Kansas City, MO 64110-2499

Phone: 816-235-1154
Fax: 816-235-5511

E-Mail: finaid@umkc.edu
Toll Free: 1-800-775-UMKC

Those with speech or hearing impairments may use Relay Missouri, 1-800-735-2966 (TT) or 1-800-735-2466 (Voice)

SECTION 1 - Separation/Divorce/Death

Complete either Section 1A or Section 1B by checking the appropriate response and completing the requested information.

1A. Who is divorced or separated? PARENT STUDENT Date of divorce or separation: _____

Is child support being received? YES NO

If yes, how much is received per month? \$ _____ Date that child support will end: _____

Is spousal support and/or alimony being received? YES NO

If yes, how much is received per month? \$ _____

Provide a personal letter describing your situation, if divorced, a copy of your divorce decree, and complete Sections 6 and 7.

1B. Who is deceased? PARENT STUDENT'S SPOUSE Date Deceased: _____

Provide a personal letter describing your situation, attach a copy of death certificate, and complete Sections 6 and 7.

SECTION 2 - Reduction of Income

Answer the following questions by checking the appropriate response. Be sure to attach any required documentation. NOTE: Once this appeal has been reviewed, additional documentation may be required.

1. Who has experienced a reduction in income? PARENT STUDENT SPOUSE

2. What is the reason(s) for the reduction in income? UNEMPLOYMENT REDUCED WAGES OTHER

Complete either A, B, C, or D below.

A. If you checked "**PARENT**" in question 1 and "**UNEMPLOYMENT**" or "**REDUCED WAGES**" in question 2:

Did the parent work in 2008 but lost his/her job or experienced reduced wages prior to August 2009? YES NO
If you checked "**YES**", provide the following documentation and complete the Sections required below:

- Personal letter, signed and dated by parent, describing the situation;
- Verification from parent's employer confirming that parent worked in 2008 but lost their job or experienced reduced wages in 2009;
- Complete Sections 6 and 7, then submit this form and all required documentation to the UMKC Financial Aid and Scholarships Office.

If you checked "**NO**", an adjustment cannot be made. Do not complete the remainder of this form.

B. If you checked "**STUDENT**" in question 1 and "**UNEMPLOYMENT**" or "**REDUCED WAGES**" in question 2:

Did you work full time for at least 30 weeks in 2008 but lost your job or experienced reduced wages prior to August 2009? YES NO

If you checked "**YES**", provide the following documentation and complete the Sections required below:

- Personal letter describing the situation;
- Verification from student's employer confirming that student worked full time for at least 30 weeks in 2008 and date of termination;
- Complete Sections 6 and 7, then submit this form and all required documentation to the UMKC Financial Aid and Scholarships Office.

If you checked "**NO**", an adjustment cannot be made. Do not complete the remainder of this form.

SECTION 2 - Reduction of Income (Continued)

C. If you checked “**SPOUSE**” in question 1 and “**UNEMPLOYMENT**” or “**REDUCED WAGES**” in question 2:

Did your spouse work in 2008 but has lost this income in 2009? YES NO

If you checked “**YES**”, provide the following documentation and complete the Sections required below:

- Personal letter, signed and dated by spouse, describing the situation;
- Verification from spouse’s employer confirming that s/he worked in 2008 but lost his/her job or experienced reduced wages in 2009 and date of termination;
- Complete Sections 6 and 7, then submit this form and all required documentation to the UMKC Financial Aid and Scholarships Office.

If you checked “**NO**”, an adjustment cannot be made. Do not complete the remainder of this form.

D. If you checked “**PARENT**”, “**STUDENT**” or “**SPOUSE**” in question 1 and “**OTHER**” in question 2:

- Provide a personal letter, signed and dated by appropriate individuals, describing the situation;
- Submit supporting documentation;
- Complete Sections 6 and 7, then submit this form and any supporting documentation to the UMKC Financial Aid and Scholarships Office.

An example would be untaxed income or benefits received in 2008 that has been reduced or lost in 2009. The documentation would include court documents or statements from appropriate agency(s) verifying that the untaxed income or benefit was received in 2008 but lost or reduced in 2009.

SECTION 3 - Unusual Medical and Dental Expenses

Please provide the following documentation:

- Personal letter, signed and dated by appropriate individuals, describing the situation and listing expenses paid;
- *Explanation of Benefits* form for insurance or, if student/spouse or parent(s) do not have insurance, the appropriate party must provide copies of paid billing statements for medical/dental expenses;
- If the person in question will incur additional medical/dental expenses in 2009, they must provide a statement from their health care provider which specifically states what the projected medical/dental expenses will be through the end of 2009.

SECTION 4 - Elementary/Secondary School Tuition - Child Care Expense - Repairs to Student’s Vehicle - Computer Purchase - Required Books and/or Supplies - Other

Please provide the following documentation:

- Personal letter, signed and dated by appropriate individuals, describing the situation and listing expenses paid;
- Supporting documentation as indicated below.

Elementary/Secondary School Tuition	The student and spouse (if applicable), or parent(s) of dependent children, must submit documentation from the elementary or secondary school stating tuition paid minus any scholarship(s) awarded for tuition.
Repairs to Student’s Vehicle	The student must submit paid receipts for repairs performed between 8/20/09 and 7/30/10. Estimated receipts will not be considered. Repairs performed must be for the student’s vehicle and cannot include the purchase of a new or used vehicle.
Child Care Expense	The student must submit documentation from the third-party child care provider indicating monthly child care costs for each child.
Required Books and/or Supplies	The expenses must be required of every student in the class. The student must submit paid receipts before an adjustment will be made.
Personal Computer Purchase *Read PC Policy on our website	The student must provide a paid store receipt documenting the actual cost of the PC. If a student needs the funds prior to purchasing the PC, the student must provide a spec sheet for the cost of the PC.*
Other	Provide a written explanation of the expense and appropriate documentation. Additional documentation may be requested by this office.

