

The U.S. Department of Education recognizes that special circumstances may exist, and allows the Office of Financial Aid to re-evaluate, for its approval, your federal student aid eligibility. Please indicate your reason for a re-evaluation, and submit ALL required documentation. Please note that when fixed federal and/or state student aid amounts have already been awarded, no change can be made to eligibility. An appeal submitted without required documentation is incomplete and cannot be reviewed.

Application Deadline

 Fall/Spring Term – October 31, 2017 Spring Term – March 31, 2018 Summer Term – June 30, 2018

SECTION 1: IDENTIFICATION

Student Name:

Roosevelt ID #:

Street Address:

Phone No.:

City, State, Zip:

Email Address:

SECTION 2: SPECIAL CIRCUMSTANCE AND REQUIRED DOCUMENTATION

Check one box and attach the related, required documentation.

 Reduction or Loss of Job

You must provide a letter from the employer and supporting documentation such as proof of severance payment or Unemployment Benefits Statement. You must also provide year to date paystubs.

 Divorce/Separation

Divorce: You must provide a copy of the court issued divorce decree.

Separation: You must provide one of the following: legal separation court agreement or a statement from yourself or one parent explaining the current marital status with proof of separate residences maintained by each individual (lease, utility bills, etc).

 Recent Death of Student's Spouse or Parent(s)

You must provide a copy of an official death certificate.

 Loss of Unemployment Benefits

You must provide a statement from the unemployment agency detailing the amount of benefits received and date terminated.

 Other – please explain/summarize your circumstance below or in an attached letter

You must submit documentation that you believe is appropriate for your situation.

For all circumstances, please provide a copy of your and your spouse's (or your parent(s'), for dependent students) most recent IRS Tax Return Transcript which may be obtained at www.irs.gov/Individuals/Get-Transcript, and attach copies of ALL 1099's and/or W-2 statements.

Student Name:

[Blank yellow box for Student Name]

Roosevelt ID #:

[Blank yellow box for Roosevelt ID #]

SECTION 3: PROJECTED YEARLY INCOME

	Parent(s) <small>(DEPENDENT STUDENT ONLY)</small>	Student	Student's Spouse <small>(INDEPENDENT STUDENT ONLY)</small>
Gross earnings from work: January - December			
Unemployment Compensation			
Taxable Social Security Benefits			
Other Taxed Income			
Child Support Received			
Untaxed Welfare/Social Security Benefits			
Workers Compensation			
Interest or Dividend Income			
Other:			
Other:			
	Total \$	Total \$	Total \$

SECTION 4: TERMS AND CONDITIONS

- I understand that the Office of Financial Aid reserves the right to request additional documentation at its discretion and that I will be notified if other items/documentation are needed.
- I understand that my request may be denied or suspended if I do not provide thorough and complete documentation.

SECTION 5: CERTIFICATION AND SIGNATURES

By signing this form, I certify the information on this form and any attachments are accurate and complete to the best of my knowledge. If requested, I agree to provide documentation to support the information I have provided on this form. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be reported to the federal Inspector General and/or subject to a fine, imprisonment or both, under provisions of the United States Criminal Code.

PHYSICAL SIGNATURE – DO NOT TYPE		PHYSICAL SIGNATURE – DO NOT TYPE	
Student Signature	Date	Parent Signature (DEPENDENT ONLY)	Date

Submit this form to the Office of Financial Aid in person (1M16 Wabash/Mezzanine Floor) or by email to fas@roosevelt.edu, or by fax (to 312-341-3545).