

**APPEAL FOR REVIEW OF FINANCIAL CIRCUMSTANCES
2010-2011 (Dependent Student)**

Student Name: _____ ID Number: _____

Address: _____
City, State Zip Code

Telephone Number: _____ E-mail Address: _____

A Financial Aid Administrator may use professional judgment on a case-by-case basis to determine if individual students have special circumstances that warrant re-evaluation of aid eligibility. You and/or your family may have experienced a major change in your financial situation since you filed the financial aid application. If so, check the appropriate box and submit the proper supporting documentation as requested.

The following examples are generally not considered special circumstances and may not be processed as a special circumstance. The examples include, but are not limited to, you and/or your parents(s):

- ▼ Stopped working to attend college in 2010-2011
- ▼ Stopped working full-time and started working part-time to attend college in 2010-2011
- ▼ Are working fewer hours in 2010 than 2009
- ▼ Are working less overtime in 2010 than 2009

All students must submit a detailed narrative that clearly outlines and explains the circumstances that you believe merit a financial override. Be sure to sign and date this narrative.

a. Loss of Employment — Check either parent or student and submit the required documentation (must have been unemployed for at least twelve (12) weeks at the time of application).

Student or Parent

- Copy of separation notice or statement from previous employer.
- Copy of your (and your parents) latest pay statement for the current year.
- Dependent Verification Worksheet for current year.
- Copy of the previous year's signed federal 1040 and W-2 forms if married.
- Estimate all income from all sources for the current year on the **Expected Total Income and Benefits form** (either Independent or Dependent).

b. Loss of Untaxed Income — Check either parent or student and submit supporting documentation.

Student or Parent

- Copy of court ordered suspension of child support, or other untaxed income.
- Verification worksheet for current year.
- Copy of the previous year's signed federal 1040 and W-2 forms if married.
- Estimate all income from all sources for the current year on the **Expected Total Income and Benefits form**.

c. Death — Submit appropriate supporting documentation:

Parent

- Copy of death certificate or obituary.
- Verification worksheet for the current academic year.
- Copy of the previous year's signed federal 1040 form.
- Copy of W-2 form(s) for previous year .
- Estimate all income from all sources for the current year on the **Expected Total Income and Benefits form**.

Expected Total Income and Benefits for Dependent Student

January 1, 2010 – December 31, 2010

Please provide 2010 income for all of the sections below. **Do not leave any items blank.** Documentation of year-to-date earnings must be provided. **PLEASE REPORT ALL 2010 INCOME that you have received and EXPECT to receive.**

1. Wages, Salaries, Tips, etc. (Do not include college work-study or tax deductible contributions to IRA/KEOGH/401k/403b accounts):

	Student	Spouse	Father/Stepfather	Mother/Stepmother
1-01-10 to present				
Present to 12-31-10* (*include an explanation as to how this amount was calculated)				
Total				

Please circle documentation provided: 2009 federal income tax return with all schedules and W-2s, check stubs, wage statements, other _____.

2. Other Taxable Income*: Sources: unemployment compensation, taxable portion of Social Security benefits, severance pay, interest income, dividends, alimony, business or farm income, capital gains, pensions and annuities (minus rollover amounts), IRAs (minus rollover amounts), rents, royalties, partnerships, estates, trusts, life insurance payments and any other taxable income.

	Student	Spouse	Father/Stepfather	Mother/Stepmother
Source:				
Source:				

*Do not include income or capital gains from the sale of a business or farm if the sale resulted from a foreclosure, forfeiture, bankruptcy or involuntary liquidation.

3. Untaxed Income and Benefits: List total 2010 income expected.

	Student	Spouse	Father/Stepfather	Mother/Stepmother
Social Security				
SSDI				
W-2 Retraining Benefit				
Child Support				
Workers Compensation				
IRA/KEOGH				
401k/403b				
Housing Allowance (military/clergy)				
Untaxed Pensions (not rollover)				
Tax Exempt Interest				
Veterans Benefits (not education)				
Cash Support (paid on your behalf)				
Other: _____				

Certification: Please read and sign below.

My signature and date below certifies that the information provided on this form and the contents of any and all attachments are true, accurate and complete to the best of my knowledge. I understand that the MATC Financial Aid Office reserves the right to request copies of my 2010 taxes to verify the changes in income processed before December 31, 2010.

I understand that upon review of the documents that I have submitted, the MATC Financial Aid Office may use professional judgment and require that I submit additional information. I also understand that I will be notified by MATC Student E-mail of the decision to process or not process my Special Circumstances. In addition, I further understand that THE DECISION MADE BY THE FINANCIAL AID OFFICE IN REGARD TO THE PROCESSING OF MY SPECIAL CIRCUMSTANCES IS FINAL AND THERE IS NO ADDITIONAL APPEAL PROCESS!

Student signature

Date

Spouse signature

Date

Please submit your **signed, dated and completed** Special Circumstances Information Form, along with the support documentation, to the MATC Financial Aid Office in person or by regular mail as soon as possible.