

W&M FINANCIAL AID

2023-24 Appeal for Consideration of Special Circumstances

Name: W&M Student ID #:

Use this form to report a change in family situation that is not addressed on the 2023 - 2024 Free Application for Federal Student Aid (FAFSA). Special Circumstance appeals are reviewed on a case by case basis.

Please be aware that additional aid is not guaranteed.

The following are examples of situations NOT considered as Special or Extraordinary Circumstances:

- Personal discretionary expenses (e.g. bankruptcy, personal debt, wedding cost, credit cards, mortgage, etc).
- Stock market losses
- Tuition paid for children in primary or secondary private schools
- Financial Aid offers from other institutions
- Voluntary job loss

Section 1: Initial Required Documentation

The following items are required before consideration will be made to review the appeal.

- Attached a detailed letter of explanation (typed) specifying the reason(s) that an appeal is being pursued.
- 2023 - 24 Verification Worksheet: ([Dependent](#) or [Independent](#), depending on how you completed your FAFSA)
- 2021 IRS Tax Return Transcripts for all tax filers listed on the FAFSA: <https://www.irs.gov/individuals/get-transcript>
Alternatively you may also use the IRS Data Retrieval Tool to import your tax information into the FAFSA (if eligible).
- 2021 Wage Documentation: Include all earning statements (W2's, 1099's all Schedules, K-1's, etc)

Section 2: Conditions for Appeal

Select the appeal scenario and provide the applicable supporting documentation.

<input type="checkbox"/> Loss of Employment or Reduction of Income	<ul style="list-style-type: none"> • Letter of Separation from employer • Copy of final pay stub from previous employer and most recent pay stub, if re-employed. • Copy of Severance Agreement if applicable • Copy of unemployment benefits or determination of ineligibility for benefits.
<input type="checkbox"/> Divorce or Separation	<ul style="list-style-type: none"> • Copy of divorce decree/separation agreement or evidence of separate living situation (for example separate addresses listed on current utility bills)
<input type="checkbox"/> Death of a parent or spouse	<ul style="list-style-type: none"> • Copy of death certificate
<input type="checkbox"/> High Out of Pocket Medical Expenses <i>Financial Aid eligibility already accounts for a portion of medical expenses. Please be aware that even if we can verify medical expenses, it may be less than the threshold of what was already taken into consideration and will not result in a change in eligibility.</i>	<ul style="list-style-type: none"> • Signed copy of the 2020 1040 Schedule A (if you itemized your deductions) OR • Submit a copy of medical bills and proof of payment. • Itemized spreadsheet of medical expenses.
<input type="checkbox"/> Other	<ul style="list-style-type: none"> • Provide all supporting documentation that allows the appeal committee to see demonstrated cause and effect.

Section 3: Estimated Income Information

Provide projected income that you or your family expects to receive between January 1, 2023 - December 31, 2023.

ESTIMATED GROSS TAXED INCOME	Father or Step Father	Mother or Step Mother	Student	Student's Spouse
Wages, Salaries, Tips				
Severance or accrued benefits pay				
Pensions and annuities				
Interest, dividends, and capital gains				
Business or farm income/loss				
Real Estate, S-Corporation, and Partnership income/loss				
Social Security benefits (<i>taxable</i>)				
Property/Rental Income received from rents after expenses				
Alimony				
Unemployment compensation				
Any other taxed Income				

ESTIMATED GROSS UNTAXED INCOME	Father or Step Father	Mother or Step Mother	Student	Student's Spouse
Social Security benefits (<i>include SSI and disability</i>)				
Retirement or disability benefits				
Worker's Compensation				
Welfare benefits				
Living and housing allowance for clergy, military and others				
Child support received for all children				
Veteran's benefits (<i>except student's educational benefits</i>)				
Any other untaxed income and benefits				
Cash or any money paid on your behalf				

Signature and Certification

- I certify that all of the information provided on this form is true and accurate to the best of my knowledge.
- I understand that if I purposely give false or misleading information, I may be fined, sentenced to jail, or both.

Parent Signature: _____

Date: _____

*Signatures must be handwritten. Computer fonts are not acceptable.

Student Signature: _____

Date: _____

*Signatures must be handwritten. Computer fonts are not acceptable.

Use one of the following methods to return this form:

Online Upload (preferred): <https://www.wm.edu/financialaid/box>

Fax: 757-221-2515

To protect your data, we do not accept documents via e-mail attachment

Mail: Office of Student Financial Aid
William & Mary
P.O. Box 8795
Williamsburg, VA 23187-8795

Office of Student Financial Aid
William & Mary
Blow Memorial Hall, Room 124
262 Richmond Road
Williamsburg, VA 23185