

W&M FINANCIAL AID

2024 - 25 Appeal for Consideration of Special Circumstances

Name: W&M Student ID #:

Use this form to report a change in family situation or unusual circumstance that could impact financial aid eligibility.

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

Conditions for Appeal	Supporting Documentation:
<input type="checkbox"/> Loss of Employment or Reduction of Income <i>Loss of employment can be considered 90 days after last date of employment. Reduction of income can be considered with formal job offer and paystub and/or 2023 tax returns and wage statements.</i>	<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 <i>Within the last 12 months</i>	<ul style="list-style-type: none"> • Copy of divorce decree/separation agreement • Evidence of separate living situation example: separate addresses listed on current utility bills
<input type="checkbox"/> Recent Death of a parent or spouse <i>Loss within the last 24 months</i>	<ul style="list-style-type: none"> • Copy of death certificate • Information on death benefits Social Security benefits life insurance distributions IRA/Retirement benefits
High Out of Pocket Medical Expenses <i>Financial Aid eligibility already accounts for a portion of medical expenses. Please be aware that an appeal may not result in a change in a change in eligibility</i>	<ul style="list-style-type: none"> • Signed copy of the 2022 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"/> Retirement Rollover <i>Tax Year 2022</i>	<ul style="list-style-type: none"> • 2022 - Form 1099-R • 2022 - Federal 1040 tax return <i>signed</i> indicating rollover <i>Pages 1 and 2</i>
<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.

Step 1: Letter of Explanation

A detailed letter of explanation (typed) is required for all appeals. This letter should provide details specifying the reason(s) or situation that this appeal is being pursued. If a letter of appeal is not provided along with supporting documentation then this appeal will be considered incomplete.

Step 2: Estimated Income Information 2024 **Do Not leave blank**

Estimated Income Information				
Provide projected income (taxed & untaxed) that you or your family expects to receive between 1/01/2024 - 12/31/2024.				
ESTIMATED GROSS TAXED INCOME	Parent 1 or Step Parent	Parent 2 or Step Parent	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 Untaxed Income Information				
Provide projected Untaxed income (taxed & untaxed) that you or your family expects to receive between 1/01/2024 - 12/31/2024.				
ESTIMATED GROSS UNTAXED INCOME	Parent 1 or Step Parent	Parent 2 or Step Parent	Student	Student's Spouse
Social Security benefits (<i>include SSI and disability</i>)				
Untaxed IRA or Pension distribution				
Worker's Compensation				
Living and housing allowance for clergy, military and others				
Child support received for all children				
Any other untaxed income and benefits				

Step 3: 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.
- I understand that the financial aid office may request additional information as part of this appeals process.

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