



# INDIANA UNIVERSITY FORT WAYNE

## OFFICE OF STUDENT FINANCIAL SERVICES

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### 2020-2021 Special Circumstance – Expected Family Contribution Appeal

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#### **Who should file an appeal?**

If your financial situation has changed from 2018 to 2020, you can submit this application to have your financial aid eligibility re-evaluated. Some of the most common changes in financial situation are listed on page 2. Before submitting this form, please note the following:

- You must file the Free Application for Federal Student Aid (FAFSA) for the 2020-2021 academic year.
- If your FAFSA application has been selected for verification, the verification process must be completed before review of this application will begin.
- If your Expected Family Contribution (EFC) is already zero (0), you should not submit an appeal. You are currently receiving the maximum amount of aid and we are unable to make any further adjustments. You can find your EFC through your Student Center on One.IU by clicking on “View Financial Aid,” selecting the 2021 award year, and clicking “Financial Aid Need Summary.”
- Your application should be submitted no later than 30 days before the end of the award period.
- Completing this form does not guarantee an increase in aid.
- If you have previously submitted a special circumstances application, you should not file an additional appeal based on the same reason unless instructed to do so by this office.

#### **How do I file an appeal?**

Please submit:

- this completed application;
- a typed narrative explaining the situation; and
- all supporting documentation listed under the requested category

Submit all items to the Office of Student Financial Services. Please include your student ID number on all documents.

#### **When will I know the outcome?**

Applications are reviewed within 10 business days. Incomplete applications may take longer to review. Please monitor your IU email. Requests for additional documentation or appeal decisions will be communicated by email.



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**Section I:** Listed below are examples of special circumstances. Please document all circumstances that apply and provide the required materials. If you have a circumstance not addressed below, visit [go.iupui.edu/appointment](http://go.iupui.edu/appointment) to schedule an appointment with a financial aid counselor.

Circumstance	Required Documentation
<p><b>Loss or Decrease of Income</b> Voluntary job loss must be due to academic program requirements or circumstances beyond the employee’s control. For dependent students, the loss must generally occur to parent income.</p>	<ol style="list-style-type: none"> <li>1. In a typed statement, provide a detailed explanation of job loss, wage decrease, or salary decrease.</li> <li>2. For a job loss, provide a letter on company letterhead, with beginning and ending dates of employment, earnings, and any compensation received in 2020.</li> <li>3. If unemployment compensation was received in 2020, provide a copy of the most recent benefit statement. If no benefits were received, provide an explanation in your typed statement.</li> <li>4. Provide any year-to-date pay stub(s) for work in 2020 or a letter from employer stating wages or salary.</li> <li>5. Complete Section II (page 3) to estimate 2020 income.</li> </ol>
<p><b>Divorce, Separation, or Widowed after 2020-2021 FAFSA was submitted</b></p>	<ol style="list-style-type: none"> <li>1. In a typed statement, describe current living arrangements for family members, including all children.</li> <li>2. Provide documentation indicating the change in marital status (e.g., statement of separation, signed copy of divorce decree, letter from an attorney or court, or death certificate).</li> <li>3. Provide documentation indicating information regarding support the "custodial" parent/student will receive, including child support/ alimony payments or insurance settlement, pension payments, IRAs, etc., if applicable.</li> <li>4. Provide "custodial" parent or student 2019 federal tax transcripts and W2s.</li> </ol>
<p><b>Loss of One-Time or Non-Recurring Income</b></p>	<ol style="list-style-type: none"> <li>1. In a typed statement, provide a detailed explanation of the one-time or non-recurring income and how the funds were used.</li> <li>2. Provide documentation showing the amount of the one-time income.</li> </ol>
<p><b>Unusual Medical, Dental, or Nursing Home Expenses</b></p>	<ol style="list-style-type: none"> <li>1. In a typed statement, provide a detailed explanation of the unusual medical, dental, or nursing home expenses.</li> <li>2. Provide a receipt, canceled checks, or other documentation showing payment for expenses.</li> <li>3. Provide documentation of costs covered by insurance.</li> <li>4. Provide a copy of 2019 federal income tax form Schedule A (Itemized Deductions). Please note that a copy of a 2019 federal tax transcript may be requested.</li> </ol>



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**Section II:** Complete this section only if you are appealing due to loss or decrease of income or due to divorce, separation, or death. Report your total projected income and adjustments from all sources for January 1 through December 31, 2020. If income listed does not apply, answer with “0” or “none.” Click the icon or see pages 4-5 for help if you are uncertain what to report.

Independent		Income & Benefits for 2020	Dependent	
Self	Spouse		Parent 1	Parent 2
		Wages		
		Unemployment benefits		
		Interest/dividend income		
		Tax-deferred payments to pensions or retirement accounts		
		Child support received for all children		
		Alimony		
		Severance pay		
		Pensions and/or annuities distributions		
		Business/farm income		
		Rental income		
		Housing allowance (military or clergy)		
		Other  (please specify):		
		Other  (please specify):		
Independent		Income Adjustments for 2020	Dependent	
Self	Spouse		Parent 1	Parent 2
		Child support paid for all children		
		Other (please specify):		
		Other (please specify):		

**Section III: Affirmation Statement:** I certify that the information provided on this form is complete and accurate to the best of my knowledge. Additional information may be requested and must be received before the appeal is reviewed.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

To sign this form please print the form and provide your signature

Student ID Number: \_\_\_\_\_

Signature of Spouse/Parent: \_\_\_\_\_ Date: \_\_\_\_\_

Required when reducing spouse or parent income, including the parent in the household following divorce, separation, or death of one parent



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**Section IV:** Use the information below to help complete Section II on page 3.

#### **Income & Benefits for 2020**

**Wages:** Enter the amount of wages or salary you expect to earn from January 1, 2020 through December 31, 2020.

**Unemployment benefits:** Enter the amount of unemployment benefits you expect to receive from January 1, 2020 through December 31, 2020.

**Interest or dividend income:** Enter the amount of income you expect to earn from interest or dividends from January 1, 2020 through December 31, 2020.

**Tax-deferred payments to pension and retirement accounts:** Enter the amount of tax-deferred payments you expect to make to pension or retirement accounts from January 1, 2020 through December 31, 2020. Visit [studentaid.gov/2021/help/parent-tax-deferred-pension](https://studentaid.gov/2021/help/parent-tax-deferred-pension) for more information.

**Child support received:** Enter the amount of child support you expect to receive for all children in your household from January 1, 2020 through December 31, 2020. Visit [studentaid.gov/2021/help/student-child-support-received](https://studentaid.gov/2021/help/student-child-support-received) for more information.

**Alimony:** Enter the amount of alimony you expect to receive from January 1, 2020 through December 31, 2020.

**Severance pay:** Enter the amount of severance pay you expect to receive from January 1, 2020 through December 31, 2020.

**Pensions and/or annuities distributions:** Enter the amount of untaxed portions of IRA distributions and pensions you expect to receive from January 1, 2020 through December 31, 2020. Exclude rollovers. If negative, enter a zero.

**Business or farm income:** Enter the amount of income you expect to earn from a business or farm from January 1, 2020 through December 31, 2020.

**Rental income:** Enter the amount of income you expect to earn from rental properties from January 1, 2020 through December 31, 2020.

**Housing allowance:** Enter the total cash value of housing, food, and any other living allowances you expect to receive from January 1, 2020 through December 31, 2020 as a member of military, clergy, and other organization. Visit [studentaid.gov/2021/help/student-allowances](https://studentaid.gov/2021/help/student-allowances) for more information.

**Other untaxed income:** Enter the total amount of any other untaxed income or benefits, such as workers compensation, foreign income not taxed by any government, disability benefits, etc. that you expect to receive from January 1, 2020 through December 31, 2020. Visit [studentaid.gov/2021/help/student-other-untaxed-income](https://studentaid.gov/2021/help/student-other-untaxed-income) for more information. Please specify in Section II the source of the income.



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#### **Income Adjustments for 2020**

**Child support paid:** Enter the amount of child support you (and if married, your spouse) expect to pay from January 1, 2020 through December 31, 2020 because of divorce or separation, or as a result of a legal requirement. Visit [studentaid.gov/2021/help/student-child-support-paid](https://studentaid.gov/2021/help/student-child-support-paid) for more information.

**Other Income Adjustments:** Please enter the amount of any of the following income adjustments from January 1, 2020 through December 31, 2020. Please specify in Section II the source of the income.

**Education credits:** enter the total amount of education credits (American Opportunity Tax Credit or Lifetime Learning Tax Credit) you (and if married, your spouse) expect to receive from January 1, 2020 through December 31, 2020. Visit [studentaid.gov/2021/help/student-education-credits](https://studentaid.gov/2021/help/student-education-credits) for more information.

**Need-based employment:** Enter the taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships, you expect to receive from January 1, 2020 through December 31, 2020. Visit [studentaid.gov/2021/help/student-need-based-employment](https://studentaid.gov/2021/help/student-need-based-employment) for more information.

**Taxable Grants and Scholarships:** Enter the amount of any taxable grants or scholarships you expect to receive from January 1, 2020 through December 31, 2020. Visit [studentaid.gov/2021/help/student-grants-scholarships](https://studentaid.gov/2021/help/student-grants-scholarships) for more information.

**Combat Pay:** Enter the amount of combat pay or special combat pay you expect to receive from January 1, 2020 through December 31, 2020. Visit [studentaid.gov/2021/help/student-combat-pay](https://studentaid.gov/2021/help/student-combat-pay) for more information.

**Cooperative Education Earnings:** Enter the amount of income you expect to receive from work under a cooperative education program from January 1, 2020 through December 31, 2020. Visit [studentaid.gov/2021/help/student-cooperative-education-program](https://studentaid.gov/2021/help/student-cooperative-education-program) for more information.