

## FAFSA Data Appeal Form Instructions

We understand that the FAFSA does not take into account all situations and some students have special circumstances that impact their ability to pay for college. In order to review these situations, we require certain documentation. Prior to submitting an appeal, please read the following information.

- If you have been selected for verification, it must be completed prior to filing an appeal.
- During the appeal review, if any of the provided documentation conflicts with any information previously reported on the FAFSA, then our office is required to resolve the conflicting information regardless of if the appeal is approved or denied. This could cause an increase or a decrease to your existing financial aid award.
- We may request more information after reviewing the required items listed on this form.
- Please allow a minimum of three weeks for processing.
- Please ensure that you provide all required documentation upon initial submission. Fill in every blank. Sign where required.
- Approval of an appeal does not guarantee additional aid.
- Appeals cannot be used simply to request more financial aid. Students must accept all aid offered including federal loans for appeal to be considered.

**GRADUATE STUDENTS** – this type of appeal is not beneficial to you as your financial aid options through our office are limited to student loans. Please contact our office to discuss other options.

### Reasons for Appeal:

Examples of appeal reasons include, but are not limited to the following:

- Unemployment of more than 4 weeks following job loss
- Death of a student's parent (or spouse if independent)
- The family has incurred extraordinary medical/dental expenses
- The student's parent is attending college at least half-time in a degree-seeking program
- The student or the student's parents have separated or divorced
- The student or parent(s) no longer receives recurring income such as child support or other sources of income
- The parent or student has received payment(s) of non-recurring income (i.e. 401(k) or IRA withdrawal) which were unavailable for educational expenses

### Deadlines:

- Appeals must be submitted by **November 5, 2022** for students attending fall semester only.
- Appeals must be submitted by **April 4, 2023** for students attending fall/spring or spring semester only.

Please include the student's Virginia Tech ID (begins with 90xxxxxxx) on the top of each page.

Please review the attached FAFSA Data Appeal Form which lists the additional items for each type of appeal. **If you choose to pursue the appeal, please submit all required documents upon initial submission.**

*Select FAFSA Data Appeal in our secure [document uploader](#) to submit your appeal. Please, do not upload this instruction page. Also, please do not send your appeal via email. Virginia Tech does not open email attachments.*

**2022-2023  
FAFSA Data Appeal Form**

Student ID #: \_\_\_\_\_ Email \_\_\_\_\_ Grad Date \_\_\_\_\_  
 \_\_\_\_\_ Month/Year

Student's  
 Full Legal Name: \_\_\_\_\_  
 (Please print clearly) Last First

**Deadlines:**

- Appeals must be submitted by **November 5, 2022** for students attending fall semester only.
- Appeals must be submitted by **April 4, 2023** for students attending fall/spring or spring semester only.

**Required:**

- FAFSA Data Appeal Form (this form), completed and signed by both student and parent, if student is dependent.
- Written statement of **student or parent** describing the appeal circumstances. Use box provided on this form or attach a signed separate document.
- Additional documentation listed below. You will find any forms or worksheets requested below [here](#).

CHECK	REASON FOR APPEAL	REQUIRED DOCUMENTATION
<input type="checkbox"/> 1.	Significant reduction in student or parent(s) income.  *Please note that the <u>earliest</u> we will consider an appeal due to unemployment will be 4 weeks from the date of termination.	<p><b>Significant loss of income due to termination or change in employment</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Copy of separation notice, showing last day worked.</li> <li><input type="checkbox"/> Final pay stub and documentation of severance pay (if applicable).</li> <li><input type="checkbox"/> Documentation of unemployment benefits (if applicable) or let us know if you were not eligible or chose not to receive it.</li> <li><input type="checkbox"/> Copy of signed 2021 tax return (preferred) OR written statement of estimated earnings and non-taxable income for 2022.</li> </ul> <p><b>Significant reduction in income</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Copy of last pay stub prior to income reduction.</li> <li><input type="checkbox"/> Copy of most recent pay stub showing reduced earnings.</li> <li><input type="checkbox"/> Copy of signed 2021 tax return (preferred) OR written statement of estimated earnings and non-taxable income for 2022.</li> </ul>
<input type="checkbox"/> 2.	The student's or the student's parents' separation or divorced.	<p><b>Dependent Student</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Letters from <b>both</b> parents stating the date of separation and identifying the parent with whom the student will reside with for the majority of the year. The parent with whom the student will not reside with for the majority of the year should state how much support (if any) will be given monthly to the custodial parent for all family members.</li> <li><input type="checkbox"/> Copies of a utility bill, etc. from each parent supporting separate physical addresses.</li> <li><input type="checkbox"/> Complete <a href="#">Marital Status/Tax Filing Worksheet</a> for Parent(s)</li> </ul> <p><b>Independent Student</b></p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Letters from both student and spouse. The letters should list any dependents and include the amount of support payments (if any) provided to the student or dependents.</li> <li><input type="checkbox"/> Complete <a href="#">Marital Status/Tax Filing Worksheet</a> for Students.</li> </ul>

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

Last name \_\_\_\_\_

CHECK	REASON FOR APPEAL	REQUIRED DOCUMENTATION
<input type="checkbox"/> 3.	Death of student's parent or spouse since completion of FAFSA	<input type="checkbox"/> Copy of the parent's or spouse's death certificate <input type="checkbox"/> Complete <a href="#">Marital Status/Tax Filing Worksheet</a> (for parents or student/spouse as applicable)
<input type="checkbox"/> 4.	Parent or student received payment(s) of non-recurring income that is not available for educational expenses	<input type="checkbox"/> Documentation of fund amount and the source of the funding <input type="checkbox"/> Documentation of how funds were spent or obligated, examples may include 401(k) or IRA early withdrawal, etc.
<input type="checkbox"/> 5.	Extraordinary family medical/dental expenses not covered or reimbursed by insurance  Paid expenses only can be appealed for one calendar year, either 2020 or 2021.	<input type="checkbox"/> For 2020 expenses: submit a 2020 IRS 1040 Schedule A if you itemized medical expenses. If you did not itemize, submit proof of medical expenses paid in 2020.  <input type="checkbox"/> For 2021 expenses: submit a signed 2021 IRS 1040 Schedule A. If that has not yet been filed or if you will not itemize, submit proof of medical expenses paid in 2021.  Insurance Explanation of Benefits (EOB) is <u>not</u> acceptable documentation. <u>Please do not send cancelled checks or credit card statements.</u>
<input type="checkbox"/> 6.	The student's parent(s) attends college at least half-time in a degree seeking program	<input type="checkbox"/> Documentation of parent's enrollment including credits for the 2022-2023 academic year. <input type="checkbox"/> Documentation of parent enrollment in a degree-seeking program. <input type="checkbox"/> Documentation of any cost reimbursement (by employer for example) or signed statement that it will not be reimbursed.
<input type="checkbox"/> 7.	The student or parent(s) no longer receives recurring income such as child support, taxable social security, alimony, or other sources of income	<input type="checkbox"/> Termination of recurring income: documentation of the monthly benefit amount received and date of benefit termination. <input type="checkbox"/> Reduction of recurring income: documentation of both original benefit amount, date of reduction, and reduced benefit amount.

Asset Information (as of the date you filed the FAFSA)	Parent Amount (whole dollars only)	Student Amount (whole dollars only)
Balance of Cash, Savings, and Checking	\$	\$
Net worth of Investments ( <i>Value minus debt = current net worth</i> )	\$	\$
Net worth of Business and/or Farm ( <i>Value minus debt = current net worth</i> )	\$	\$

**Statement describing the reason for appeal request**

- Allow at least **three weeks** after submitting all requested documents for your appeal results.
- Any additional aid received from this one-time appeal is only for this year. It will not be a recurring award.

If I purposely give false or misleading information, I may receive a fine, a prison sentence, or both. By signing this form, I certify that all information is complete and correct.

**Student's Signature** \_\_\_\_\_

Electronic signatures are not allowed

**Date** \_\_\_\_\_

**Parent's Signature** \_\_\_\_\_

Dependent students only

**Date** \_\_\_\_\_



## 2022 Statement of Estimated Earnings

VT Student ID	Last Name	First Name
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**\*This is supplemental information for the FAFSA Data Appeal Form.**

**Please complete this page only if you or your parent will earn less income in 2022 than was earned in 2020.**

Income Sources	Earned Income (Year-to-Date)	+	Estimated Income (Today to Year-End)	=	2022 Total Income
Parent #1 – Wages (all jobs)	\$		\$		\$
Parent #2 – Wages (all jobs)	\$		\$		\$
Student – Wages (all jobs)	\$		\$		\$
Spouse (if applicable) – Wages (all jobs)	\$		\$		\$
Income or loss of Business or Farm	\$		\$		\$
IRA Distributions/Pensions	\$		\$		\$
Unemployment Compensation	\$		\$		\$
Severance Pay	\$		\$		\$
Other Taxable Income	\$		\$		\$

If I purposely give false or misleading information, I may receive a fine, a prison sentence, or both. By signing this form, I certify that all information is complete and correct.

**Student's Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

**Parent's Signature** \_\_\_\_\_

**Date** \_\_\_\_\_

Electronic signatures are not allowed