

# Brandeis University

## 2019-2020 Financial Aid Appeal Guidelines and Worksheet

### Instructions

Your eligibility for need-based financial aid has been determined according to federal regulations and university policies governing financial aid programs. Using the information that you provided on the FAFSA, CSS/Financial Aid PROFILE, student and parent tax returns\* and/or other supporting documentation, we have calculated your Expected Family Contribution (EFC) and awarded financial aid appropriately. We recognize that a family's income is not always consistent and that financial situations change throughout the academic year due to unforeseen circumstances.

You may request a review of your financial aid package to significant changes in your family's circumstances that affect your ability to contribute to college costs by completing this Financial Aid Appeal Worksheet and submitting the required documentation. Please complete all sections of this form as accurately as possible. If you have not already submitted a 2019-2020 FAFSA, 2019-2020 CSS/Financial Aid PROFILE, complete copies of the student's and parents' 2017 Federal Tax Returns\* and a 2019-2020 Verification Worksheet, if required, you must do so now. Again, information presented in this appeal should be new information or information that has changed significantly from your initial application. We cannot consider appeals based on credit card debt, car or mortgage payments, wedding/celebration expenses, private school costs, vacations or other discretionary expenses. **Please note that appeals will be addressed after July 1, 2019.**

Once the Student Financial Services Appeals Committee reviews the submitted documentation and determines if the student qualifies for additional aid, we will notify the student by mail. Response time will vary based on our volume of appeals at the time you submit your request. However, you can expect a status update within 5 – 10 business days. Additional aid will be considered for students on a funds available basis when the calculations result in higher financial need. Please note, additional scholarship funds will only be offered if a student has taken advantage of all other sources of financial aid (e.g., federal and state grants, subsidized and unsubsidized federal loans, etc.).

If you have any questions, please contact our office at 781-736-3700 or [sfs@brandeis.edu](mailto:sfs@brandeis.edu).

The completed Financial Aid Appeal Worksheet and all required supporting documentation should be submitted to:

Office of Student Financial Services  
Brandeis University  
MS 027, 415 South Street  
Waltham, MA 02454-9130  
FAX: 781-736-3719  
EMAIL: [finaid@brandeis.edu](mailto:finaid@brandeis.edu)

*\* Please note: complete copies of tax returns require all pages of your federal return including W-2(s), schedules, statements and business returns (if applicable).*

**Brandeis University**  
**2019-2020 Financial Aid Appeal Guidelines and Worksheet**

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Parent(s)' Name(s): \_\_\_\_\_ Day Phone Number: \_\_\_\_\_  
Parent Email Address: \_\_\_\_\_ Parent's Cell Number: \_\_\_\_\_

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Office of Student Financial Services  
Brandeis University  
MS 027, 415 South Street  
Waltham, MA 02454-9110  
FAX: 781-736-3719; EMAIL: [sfs@brandeis.edu](mailto:sfs@brandeis.edu)

**Part Ia. Student Appeal (to be completed by student and then proceed to Part III)**

Student's expected income for 2019 is significantly less than 2017. Indicate reason: \_\_\_\_\_

**List your projected gross work income for each of the following periods and proceed to Part III.** Provide most recent paystubs from any employment for the time periods below. *Do not leave any space blank. Enter "0" if you will have no earnings for a particular period.*

6/1/19 to 8/31/19: \$ \_\_\_\_\_ 9/1/19 to 12/31/19: \$ \_\_\_\_\_ 1/1/20 to 5/31/20: \$ \_\_\_\_\_

**Part Ib. Parent Appeal (to be completed by parent and then proceed to Part II)**

Check the box(es) that best describes your situation and provide copies of the documentation indicated. Be sure to complete both pages of this form accurately. Incomplete worksheets will delay the process.

- Parent is currently unemployed. Unemployed parent is:                  Parent 1                                  Parent 2  
Date employment ended: \_\_\_\_\_. *Attach letter of termination, documentation of severance and unemployment benefits and most recent paystub for each parent in the household regardless of which parent experienced the income adjustment, along with a complete copy of your 2018 Tax Return.\**
- Untaxed income or benefits received in 2017 have ended (i.e. unemployment, social security benefits, housing allowance, etc.). Date of termination: . Attach documentation from the agency providing the benefits, along with a complete copy of your 2018 Tax Return.\*
- One-time capital gain or IRA/pension distribution in 2017. *Attach a letter explaining the circumstances that resulted in the capital gain/distribution, along with a complete copy of your 2018 Tax Return.\* The letter must indicate that both the circumstances and capital gain/distribution are one-time occurrences.*
- Extraordinary unreimbursed medical and/or dental expenses. Calendar year for consideration:  2017  2018  
*Attach a detailed letter and supporting documentation of the paid unreimbursed expenses (i.e. invoices, receipts, etc.). If you are appealing based on 2018 unreimbursed medical expenses, include a complete copy of your 2018 Tax Return.\* Proceed to Part III if medical expenses are the sole appeal point.*
- Death of a parent. Date: \_\_\_\_\_. *Attach copy of death certificate and documentation of any death benefits received.*
- Other. If none of the above categories describe your family's situation, please attach a detailed letter of explanation and provide documentation of the current circumstances.

## Part II. Projected 2019 Income

Actual income will be verified in January 2020. If changes were made to your financial aid based on your projections and the actual figures are higher, we will adjust your aid accordingly and you may be required to repay financial aid received.

- Complete this section if you are appealing based on a loss of employment or any other income-related change.
- Provide information for all income categories for both parents in the household, not just the income elements that have changed. Enter "0" if no income of a certain type is expected.
- Attach documentation for your figures (i.e. most recent paystubs for both parents, severance benefits letter, unemployment benefits statement, etc.)

<u>Estimated 2019 Taxable Income</u>	<u>Documentation Included (Check box)</u>	<u>Estimated 2019 Income (1/1/2019 to 12/31/2019)</u>	<u>Office Use Only: Total '19/Verified Income</u>
1. Parent 1's 2019 work income	<input type="checkbox"/>	\$ _____	\$ _____
2. Parent 2's 2019 work income	<input type="checkbox"/>	\$ _____	\$ _____
3. Severance compensation	<input type="checkbox"/>	\$ _____	\$ _____
4. Unemployment compensation	<input type="checkbox"/>	\$ _____	\$ _____
5. Interest and dividend income	<input type="checkbox"/>	\$ _____	\$ _____
6. Business or real estate income/loss	<input type="checkbox"/>	\$ _____	\$ _____
7. Taxable IRA/pension/annuity distribution	<input type="checkbox"/>	\$ _____	\$ _____
8. Other taxable income (i.e. state tax refunds, alimony, capital gain, taxable social security, etc.)	<input type="checkbox"/>	\$ _____	\$ _____
<b>Total Taxable Income (1 through 8 above)</b>		<b>\$ _____</b>	<b>\$ _____</b>

<u>Estimated 2019 Untaxed Income</u>	<u>Documentation Included (Check box)</u>	\$ _____	<u>Documentation Included (Check box)</u>	\$ _____
Untaxed Social Security Benefits	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	AFDC/ADC or TANF \$ _____
Child Support Received	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	Cash/Gifts Paid on your Behalf \$ _____
Untaxed Pension Distributions	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	Worker's Compensation \$ _____
Payments to IRA/401K/Other Retirement Plans	<input type="checkbox"/>	\$ _____	<input type="checkbox"/>	Other Untaxed Income \$ _____ (Please Specify) _____

## Part III. Certification

The information provided on this form is accurate and complete to the best of our knowledge. We have already provided or will provide our signed complete 2017 and/or 2018 federal tax returns\*, including all schedules, W-2s and business returns if applicable. We understand that completing this form does not guarantee financial aid will be increased. We also understand that if financial aid is revised based on this appeal information, we will be required to provide documentation of final 2019 income in January 2020, and our financial aid may be revised and repaid based on actual year-end income. We understand that the student must take advantage of all other sources of financial aid (e.g., federal and state grants, federal subsidized and unsubsidized loans, etc.) in order to receive additional University funds. We also agree to notify Student Financial Services if our income changes.

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### APPEALS CANNOT BE PROCESSED WITHOUT THE FOLLOWING

- Both pages of this form completed and signed along with a letter explaining special circumstances
- Copy of signed complete 2018 federal income taxes and W-2(s) and business returns (if applicable)
- Most recent pay stubs for each parent in household
- Last pay stub from former position
- Statement of any unemployment benefits received and/or expected, and
- All other applicable documentation of special circumstances