



Section B - Appeal Information

Answer each question below.

1. Individual affected by change:

- Student
Parent 1/Stepparent 1 Name:
Parent 2/Stepparent 2 Name:
Spouse (if Independent per FAFSA) Name:

2. Explain in detail the allowable reason for submitting the Change of Financial Situation Statement of Appeal. Indicate if the circumstance occurred in 2023 or 2024 and if the circumstance has ended or is still occurring. Include the types of income affected, i.e., wages, business income, partnership/s-corporation income, unemployment, social security, worker's compensation, etc.

Multiple horizontal lines for text entry.

\*Once our office reviews the Change of Financial Situation Statement of Appeal, we will contact you for further information via email. No additional action is required on your part until we contact you.\*

Section C - Statement of Certification

I certify that the information provided on this form is true and correct.

Student Signature Date Parent Signature (Only for Dependent Students per FAFSA) Date

ENTER YOUR UIN ->

Grid of 10 empty boxes for UIN entry.