The Office of Financial Aid welcomes you to use this form to appeal your family’s financial circumstances. If your financial status has changed significantly from what you reported on your Free Application for Federal Student Aid (FAFSA), you may use the appeal form to report your current status. Be sure to complete all parts of the form and attach all required documentation. Appeals will be considered complete when all required documentation has been received.

Once your appeal has been evaluated, you will be notified in writing of the results. Please note that submission does not guarantee a change in your financial aid. Ohio Wesleyan rarely awards additional institutional aid during the academic year except in some rare cases. All requests are handled on a case-by-case basis and additional institutional aid is only provided if funds are available. In cases where more aid is awarded as a result of an appeal, funding may come in the form of federal and state aid such as grants, loans, work, or a combination of each.

In Part Two you will be asked to select among various situations that are considered to be valid reasons for appeal. Please note however, that circumstances that are not valid reasons for appeal include requests for additional aid due to tuition and room & board increases, requests to help pay for educational loans that are in repayment, incurred consumer debt (i.e. car payments, credit cards, etc…), and funding to assist with anticipated medical expenses.

Submit documents to:
Ohio Wesleyan University
Office of Financial Aid
financialaid@owu.edu
fax: 740-368-3066
61 S. Sandusky St.
Delaware, Ohio 43015

PART ONE:  Student/Parent Contact Information

Student:__________________________

Last  First  Middle

Student ID Number:_____________________

Student’s Cell Number:__________________

Student’s email:_______________________

Parent:_______________________________________

Last  First  Middle

Parent’s Cell Number:_____________________

Parent’s email:__________________________

PART THREE:  Certification

We affirm that the information contained on this form and in the attached supporting documentation is correct and complete to the best of our Knowledge. Upon request, we will provide additional documentation to substantiate any information we have provided.

__________________________________________  ____________

Student Signature Date

__________________________________________  ____________

Parent Signature Date
PART FOUR: Documentation Need

1. Please provide an explanation of your special circumstance including the time of the event or change and what you would like to take into consideration.
2. You must complete the verification process before your special circumstance can be completed. 
   a) Complete and submit the verification worksheet which you can obtain online located here.
   b) Be certain to use the IRS retrieval option to complete your financial information on the FAFSA and submit.
   c) If you are unable to use the IRS retrieval option you will need to request an IRS tax transcript at http://www.irs.gov/Individuals/Get-Transcript.
   d) If additional documentation is needed we will contact you.

3. A copy of the parents and students most recent paycheck stub(s) stating year-to-date earnings. Be sure to indicate if the pay stub represents weekly, bi-weekly, or monthly earnings.

4. Change of employment submit the following:
   a) Letter from employer of separation including the last day of work and any benefits received
   b) Letter from employer stating the date pay reduction will go into effect
   c) A copy of the Determination of Unemployment Benefits from the Bureau of Employment Services or Determination of Worker’s Compensation Benefits Statement.

5. Non-recurring income
   a) Provide documentation showing the one time income – you may want to submit your tax documents including Schedule C and Schedule F.

6. Divorce or Separation
   a) Submit a copy of the divorce decree or legal separation agreement.

7. Disability or death of a parent
   a) Submit a copy of the statement of disability or social security benefits including the date benefits will start and when your parent expects to go back to work.
   b) Submit a copy of the death certificate or obituary notice.
   c) Submit documentation of any income from social security benefits or other compensation received (i.e. insurance benefits)

8. Loss of alimony received
   a) Submit a copy of the court documents indicating the termination date of the benefits.

9. Loss of unemployment benefits received
   a) Submit documentation from the unemployment office indicating the termination date of benefits.
   b) Submit documentation from the unemployment office indicating the total benefits that will be received during the current calendar year.

PART FOUR: Documentation Need Continued

10. Loss of child support received
    a) Submit a copy of the Termination of Benefits Letter and a year-to-date payment history report from the Child Support Enforcement Agency indicating benefits received in the current calendar year.

11. Loss of Worker’s Compensation received
    a) Submit a letter from the Bureau of Worker’s Compensation indicating the termination date of benefits.
    b) Submit documentation from the Bureau of Worker’s Compensation indicating the total benefits that will be received during the current calendar year.

12. Private elementary and secondary school costs for student’s siblings
    a) Submit a listing or receipts of tuition expenses on school letterhead to be paid (minus any financial assistance received) for the current academic year.

13. Unexpected medical expenses paid that are not covered by insurance.
    a) Submit copies of medical bills paid during the current calendar year or copy of schedule A (itemized deductions) from the previous year’s Federal Tax Form 1040 if amount paid is listed on line 1 of that form.
    b) Submit a copy of your medical insurance showing patience responsibility for payment of medical charges and prescriptions.

14. Unplanned Early Retirement
    a) Submit copy of your IRA distribution, pension benefits, or annuities and/or Form SSA-1099-Social Security Benefit Statement that indicates the total amount to be received and another income received as well as the date the benefits begin.

15. Adult care expenses
    a) A detailed letter itemizing adult care expenses and information for each family member who received such support. Include the name and relationship to the student.

16. Parent in College
    a) Submit receipts or payment summary from the college the parent is attending

17. Parent Paying Parent Plus Loan for sibling’s education or personal student loans.
    a) Submit copies of receipts or a payment summary from the agency to which money is owed.
    b) Provide the monthly payment amount and the total paid during the year.