



# Gloucester County College

Office of Financial Aid

## 2009-2010 Request for Special Conditions Appeal Application

Please complete all sections of this form:

Name \_\_\_\_\_ ID# \_\_\_\_\_

Address \_\_\_\_\_ City \_\_\_\_\_ Zip Code \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail \_\_\_\_\_

Gloucester County College students who apply for financial aid are required to use their 2008 base year income to complete the 2009-2010 FAFSA application. Students may elect to appeal their eligibility for federal and state aid based on selective involuntary reduction in income from the base year information provided on the FAFSA. Students that have a drastic change in income due to an unforeseen or unpredictable event may be eligible for a Special Conditions appeal. Requests for appeals are reviewed on a case by case basis since all students may have different circumstances. Financial Aid Administrators will review each individual appeal application with all supporting documentation. Applications that are submitted for review without supporting documentation will be automatically denied. Students will be informed of the administrators' decision by mail. Students are encouraged to apply for this appeal only after the involuntary or unforeseen event has occurred, and all documentation for projecting income can be submitted.

**1. Please check the appropriate reason for your income and/or your spouse if independent (or parents if dependent) income will be less in 2009 than in 2008. Complete the chart on the reverse side to show how you determined your new projected income figures. Financial Aid Administrator will also be determining your figures determined from your supplied documents.**

- Involuntary loss of or change in employment. Date of employment change \_\_\_\_/\_\_\_\_/\_\_\_\_
- Divorce/separation (give only information on yourself, if independent, or your custodial parent). Date of separation/divorce \_\_\_\_/\_\_\_\_/\_\_\_\_.
- Disability of student, spouse or parent.
- Non-reimbursed paid medical (expenses not including co-pays) that exceed 3% of the base year AGI.
- Other (please explain in a statement on another sheet of paper attached to this form) list date here \_\_\_\_/\_\_\_\_/\_\_\_\_.

**2. Please attach supporting documentation for your appeal. Remember that appeals submitted with out documentation will be denied.**

- Signed copies of your and your spouses (if married) and your parents (if dependent) 2008 tax returns, schedules, and all accompanying W-2's
- Documentation of your untaxed income from 2008 (i.e., child support received, SSI/SSD, TANF)
- Printed or typed statement of the situation or reason for appeal and date of your situation or reasons.
- Documentation of your projected income for 2009 (last pay stubs, unemployment letter of determination, child support received, copy of severance pay, SSI/SSD, workman's compensation determination)
- Documentation for your appeal. (examples below)
  - a. Job loss – termination letter or lay-off notice
  - b. Death of wage earner – copy of death certificate
  - c. Separation - Utility bills no more than 30 days old, copy of lease, separate pay stubs with different address.
  - d. Divorce – copy of the finalized divorce decree
  - e. Other documentation (please list)

Gloucester County College Financial Aid Administrators require up to thirty (30) days to review appeals, Due to volume, and amount of attention needed, some appeals may take longer. Financial Aid Administrators may also require additional information for clarification of your projected income if this is needed you will be contacted by the Administrator reviewing your file\*. After a determination has been made on your appeal, you will be notified in writing of the outcome by mail. Results of appeals will not be given or discussed over the phone for privacy reasons. Students are asked to only submit one appeal per academic year. Appeals are not guaranteed to be approved; Administrators will use their professional judgment to determine whether your situation/change in income warrants an appeal approval. Please submit your appeals in person to the Office of Financial Aid in the Student Services building.

**\*Students that do not respond to the requests for additional information within 30 days of that request will forfeit their appeal. The appeal will be denied and the student will be packaged based on their original FAFSA eligibility determination.**



# Gloucester County College

Office of Financial Aid

## 2009-2010 Request for Special Conditions Appeal Application

### Anticipated Income Worksheet

Gloucester County College Financial Aid Administrators will only evaluate completed worksheets. Be sure to attach sufficient documentation of your projected income.

#### 3. Complete the anticipated income chart below.

To complete the chart below, you'll need to list all income and benefits that you and/or your family members will receive from January 1, 2009 until December 31, 2009. All sections must have an answer reported. If the type of income listed does not pertain to you or a family member report a '0' or N/A. Please do not leave any black spaces this may delay the processing of your appeal. Students must complete the student section, if you are married complete the student and spouse sections, if you are dependent complete the student and parent sections.

Taxable income	Student	Spouse	Father	Mother	F/A Administrators determined amount. Do not write in this column.
2008 Income Earned from Work					
2009 Unemployment benefits					
2009 Severance Pay					
2009 Pension/Annuities					
2009 other taxable incomes. (i.e., rent, business income, alimony, royalties, capital gains)					
Untaxed income	Student	Spouse	Father	Mother	F/A Administrators determined amount. Do not write in this column.
2009 Social Security Benefits					
2009 Child Support					
2009 Public Assistance (TANF)					
2009 Retirement/Disability					
2009 Untaxed Pension (not including rollovers)					
2009 VA Benefits					
2009 Other incomes not reported in any other column (please explain income in the appeal letter)					

#### 4. Household Information

Please list below any members of your family that are or will be attending Gloucester County College during the 2009/2010 Academic Year. You must report the members of your immediate family (parents, step-parents, children, step-children, siblings, step-siblings) the information you report may affect their eligibility for Financial Aid as well as your own. If you need more space please attach an additional sheet of paper.

Family Member	Relationship to student	Applied for Financial Aid (YES/NO)

Regardless if a student receives any form of financial aid (NJ STARS scholarship, grants, loans, other scholarships, and/or tuition waivers), the student must understand they are PERSONALLY RESPONSIBLE for all financial charges they accrue at Gloucester County College. Gloucester County College may permit any student to register before determining a student's eligibility for the Federal or State Grants, Loans, Scholarships or Tuition Waivers. If, *FOR ANY REASON*, a student should become ineligible for Federal and/or State Grants, Loans, Scholarships, Tuition Waivers or other types of financial aid, the student agrees to pay their account in full including any collection and/or attorney's fees that may be incurred by or on behalf of the College to satisfy the

student's personal financial obligations. By signing below I acknowledge that I have read and understand the information provided on this form. By signing this form you confirm that the information you provided on this appeal and it accompanying supporting documents is true and accurate to the best of your knowledge.

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

Parent Signature \_\_\_\_\_

Date \_\_\_\_\_