



**FINANCIAL AID APPEAL FORM  
2017-2018**

Student's Name \_\_\_\_\_ Student's ID Number \_\_\_\_\_  
Parent's Name \_\_\_\_\_ Day Phone Number \_\_\_\_\_  
Parent E-mail Address \_\_\_\_\_ Are you the  Custodial Parent or  Non-custodial parent?

You may request reconsideration of your award through the Tufts University financial aid appeal process. If you can document a significant change in your family's financial circumstances, or you believe there are special circumstances that were not initially considered, please complete this form. The Financial Aid Appeal Committee will review your appeal and have a decision to you within 7-10 business days. Students will be notified, by mail or email, of the appeal decision.

**Section A: CHANGES IN HOUSEHOLD INCOME**

**1. Loss or Change of Job**

Which person experienced a loss of/change in income?  Father/Stepfather  Mother/Stepmother

Effective Date: \_\_\_\_\_

Reason for reduction/loss:  Job change  Reduced Commissions or Overtime  New Business Start-Up  
 Retirement  Termination by Employer  
 Other (please specify) \_\_\_\_\_

**2. Loss of Other Income (i.e. child support, unemployment, social security benefits, housing allowance etc.)**

Person receiving the income  Parent(s)  Student

Name of income(s) that were affected \_\_\_\_\_

Date of change \_\_\_\_\_

<b>REQUIRED: Document the change with the following information:</b>
1) Page two of this form
2) Copy of 2016 federal income taxes (if completed)
3) Most recent pay stub showing new or changed salary,
4) Last pay stub from former position,
5) Statement of any unemployment benefits received and/or expected, and
6) Other applicable documentation.

**Section B: Certification**

By signing below, I/we affirm that the data contained on this form is true and complete to the best of my knowledge, and understand that if any of my projections change, I will immediately notify the Office of Financial Aid in writing.

Student \_\_\_\_\_ Date \_\_\_\_\_

Parent \_\_\_\_\_ Date \_\_\_\_\_

**You may return completed application to: Tufts University, Financial Aid Office, Dowling Hall, 419 Boston Avenue, Medford, MA 02155  
FAX: 617.627.3987**

**Do not email tax returns or documents with social security numbers on them!**

## Section C: 2016 Earned Income

Be certain that you provide information for all categories of income, not just the types of income that have changed. Enter "0" where appropriate; **DO NOT LEAVE ANY ITEM BLANK.**

Attach any documentation to support your figures, such as your most recent pay stubs, a letter from your employer regarding severance package terms, unemployment benefit statement, etc.

### 2016 (1/1/16 to 12/31/16) Taxable Income

Father's/stepfather's 2016 gross income from work \$ \_\_\_\_\_  
 Mother's/stepmother's 2016 gross income from work \$ \_\_\_\_\_  
 Severance pay/vacation payout \$ \_\_\_\_\_  
 Unemployment compensation \$ \_\_\_\_\_  
 (amount per week \_\_\_\_\_ x # of weeks \_\_\_\_\_ )  
 Interest and dividend income \$ \_\_\_\_\_  
 Net income/loss from Business (reported on Schedule C or E) \$ \_\_\_\_\_  
 Rental income/loss (reported on Schedule E) \$ \_\_\_\_\_  
 Taxable IRA/pension/annuity distribution \$ \_\_\_\_\_  
 Alimony received \$ \_\_\_\_\_  
 Other taxable income (such as capital gains, taxable social security, etc.) \$ \_\_\_\_\_

### 2016 (1/1/16 to 12/31/16) Untaxed Income

Child support received for all children \$ \_\_\_\_\_  
 Child support received for student \$ \_\_\_\_\_  
 Untaxed Social Security Benefits \$ \_\_\_\_\_  
 Housing Allowance \$ \_\_\_\_\_  
 Untaxed pension distributions \$ \_\_\_\_\_  
 Cash/gifts paid on your behalf \$ \_\_\_\_\_  
 Tax exempt interest income \$ \_\_\_\_\_  
 Worker's Compensation \$ \_\_\_\_\_  
 Contributions to retirement plans (i.e.401(k), 403b, SEP, IRA, etc) \$ \_\_\_\_\_  
 Other untaxed income (specify below) \$ \_\_\_\_\_

## Section D: 2017 Estimated Income

Be certain that you provide information for all categories of income, not just the types of income that have changed. Enter "0" where appropriate; **DO NOT LEAVE ANY ITEM BLANK.**

Attach any documentation you have for your figures, such as your most recent pay stubs, a letter from your employer regarding severance package terms, unemployment benefit statement, etc.

### Estimated 2017 (1/1/17 to 12/31/17) Taxable Income

Father's/stepfather's 2017 gross income from work \$ \_\_\_\_\_  
 Mother's/stepmother's 2017 gross income from work \$ \_\_\_\_\_  
 Severance pay/vacation payout \$ \_\_\_\_\_  
 Unemployment compensation \$ \_\_\_\_\_  
 (amount per week \_\_\_\_\_ x # of weeks \_\_\_\_\_ )  
 Interest and dividend income \$ \_\_\_\_\_  
 Net income/loss from Business (reported on Schedule C or E) \$ \_\_\_\_\_  
 Rental income/loss (reported on Schedule E) \$ \_\_\_\_\_  
 Taxable IRA/pension/annuity distribution \$ \_\_\_\_\_  
 Alimony received \$ \_\_\_\_\_  
 Other taxable income (such as capital gains, taxable social security, etc.) \$ \_\_\_\_\_

### Estimated 2017 (1/1/17 to 12/31/17) Untaxed Income

Child support received for all children \$ \_\_\_\_\_  
 Child support received for student \$ \_\_\_\_\_  
 Untaxed Social Security Benefits \$ \_\_\_\_\_  
 Housing Allowance \$ \_\_\_\_\_  
 Untaxed pension distributions \$ \_\_\_\_\_  
 Cash/gifts paid on your behalf \$ \_\_\_\_\_  
 Tax exempt interest income \$ \_\_\_\_\_  
 Worker's Compensation \$ \_\_\_\_\_  
 Contributions to retirement plans (i.e.401(k), 403b, SEP, IRA, etc) \$ \_\_\_\_\_  
 Other untaxed income (specify below) \$ \_\_\_\_\_

How much do you feel you are able to contribute to Tufts' 2017-18 education costs? \$ \_\_\_\_\_

*If the sections above did not allow you to fully explain your request for an appeal, please attach additional pages and documentation describing the basis for your request.*