



**FINANCIAL AID APPEAL FORM  
2021-2022**

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    COVID-19  
    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 \_\_\_\_\_

**REQUIRED: Document the change with the following information:**

- 1) Page two of this form
- 2) Copy of 2020 federal income taxes (if complete)
- 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 \_\_\_\_\_

**Submit completed form and corresponding documents to IDOC or FAX to Financial Aid Office at 617.627.3987  
Do not email tax returns or documents with social security numbers on them!**

## Section C: 2020 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.**

Provide 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.

### 2020 (1/1/20 to 12/31/20) Taxable Income

Father/stepfather's 2020 gross income from work	\$ _____
Mother/stepmother's 2020 gross income from work	\$ _____
Severance pay/vacation payout	\$ _____
Unemployment compensation (amount per week _____ x # of weeks _____)	\$ _____
Pandemic Emergency Unemployment (\$600/week)	\$ _____
Interest and dividend income	\$ _____
Net income/loss from Business (from Schedule C or E)	\$ _____
Rental income/loss (from Schedule E)	\$ _____
Taxable IRA/pension/annuity distribution	\$ _____
Alimony <b>received</b>	\$ _____
Other taxable income (capital gains, farm income, taxable social security, etc.)	\$ _____

### 2020 (1/1/20 to 12/31/20) Untaxed Income

Child support received for <u>all</u> 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	\$ _____
Disability and/or Worker's Compensation	\$ _____
Contributions to retirement plans	\$ _____

## Section D: 2021 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.**

Provide 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.

### 2021 (1/1/21 to 12/31/21) Taxable Income

Father/stepfather's 2021 gross income from work	\$ _____
Mother/stepmother's 2021 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 (from Schedule C or E)	\$ _____
Rental income/loss (from Schedule E)	\$ _____
Taxable IRA/pension/annuity distribution	\$ _____
Alimony <b>received</b>	\$ _____
Other taxable income (capital gains, farm income, taxable social security, etc.)	\$ _____

### 2021 (1/1/21 to 12/31/21) Untaxed Income

Child support received for <u>all</u> 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	\$ _____
Disability and/or Worker's Compensation	\$ _____
Contributions to retirement plans	\$ _____

How much can you contribute to Tufts' 2021-22 education costs? \$ \_\_\_\_\_

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