

WILLAMETTE UNIVERSITY/PACIFIC NORTHWEST COLLEGE OF ART
FINANCIAL AID APPEAL FORM
2024-25

Student Name: _____ Student ID: _____

INSTRUCTIONS

1. If you have not done so already, file the Free Application for Federal Student Aid (FAFSA) at <https://studentaid.gov/h/apply-for-aid/fafsa>. If you are not eligible to file the FAFSA, contact our office for further instructions.
2. **Provide a written statement describing the issue(s) you are concerned about.**
3. Review the list of circumstances on this form and check off any that apply to you/your family.
4. Provide the supporting documentation listed next to the circumstances you have checked off.
5. **Sign this appeal form (parent’s signature is required for Dependent students). NOTE: font-based, typed, or electronic signatures are NOT acceptable.**
6. Submit your written statement, supporting documentation, and the signed appeal form to the Office of Financial Aid (Email as an attachment to finaid@willamette.edu or send via regular mail to Willamette University Financial Aid Office, 900 State Street, Salem, OR 97301.)
7. If sending via email, be sure to block out any Personally Identifiable Information (social security numbers, dates of birth, etc.)

DID YOU/YOUR FAMILY EXPERIENCE... (Check all that apply)	PLEASE PROVIDE THE FOLLOWING DOCUMENTATION IN SUPPORT OF YOUR REQUEST
<input type="checkbox"/> Loss of Employment?	- Include a dollar amount estimate of your 2023 gross income in your written statement.
<input type="checkbox"/> Reduction in wages?	- Copy of student/parent’s most recent pay stub. - Include a dollar amount estimate of your 2023 gross income in your written statement.
<input type="checkbox"/> Reduction in Untaxed Income or Benefits (i.e. child support)?	- For untaxed income other than child support: Letter from the appropriate agency or authority that details the date benefits ended, type and amount of benefits received for 2022. - For child support: Include the date the child support ended in your written statement.
<input type="checkbox"/> One-time Income?	- Proof of the one-time income (i.e. W2, tax schedules, 1099, etc.) - Include an explanation as to why the income is not recurring, and how that one-time income was spent in your written statement.

<input type="checkbox"/> Extraordinary medical or dental expenses not covered by insurance	- Include the estimated amount of medical expenses you will pay in 2024 in your written statement.
<input type="checkbox"/> Costs for private elementary or high school tuition?	- Copy of the private school tuition contract(s) for the 2024-5 school year.
<input type="checkbox"/> Divorce or separation?	- A copy of legal separation or divorce papers. - Specify which parent will provide the most financial support to the student after the divorce/separation, and provide that parent's income and asset information in your written statement.
<input type="checkbox"/> Death of a parent?	- Include an estimate of the surviving parent's 2024 income in your written statement.
<input type="checkbox"/> Provide support to a family member who was not considered on the FAFSA?	- Include information about the nature and amount of financial support in your written statement.
<input type="checkbox"/> Have a sibling under the age of 24 that is also attending college this year?	- Include the dollar amount of out-of-pocket costs for your sibling's school in your written statement. - Provide documentation of those costs.

By signing this form, I affirm that all information on this form and on any attachments is complete and accurate to the best of my knowledge. If requested, I agree to provide documentation to support the information I have provided on this form. I understand that any false statements or misrepresentation may be cause for denial, reduction, withdrawal, and/or repayment of financial aid, and I may be subject to a fine, imprisonment or both, under provisions of the United States Criminal Code.

NOTE: Font-based, typed, or electronic signatures are NOT acceptable.

Student Signature (Required) Date

Parent Signature (Required for Dependent Students) Date

Parent Email Address