

ALASKA PACIFIC UNIVERSITY
Financial Aid Office
2023-2024 Special Circumstances Request Form
4101 University Drive Anchorage AK 99508 Phone (907) 564-8341 Fax (907) 564-8317
financialaid@alaskapacific.edu

(Filing this form does not guarantee your appeal will be approved or that you will be eligible for additional aid.)

Name _____ SSN _____ APU ID _____

The Financial Aid Office has the authority to make professional judgment which makes allowances for students who have unusual and special circumstances that could affect their ability to pay for their education. Please note: **An approved appeal does NOT automatically make you Pell eligible.** It only allows the Financial Aid Office to change certain data fields on your FAFSA to more accurately reflect your financial circumstances. The U.S. Department of Education determines your eligibility based on the changes.

Section I: Identify your circumstance.

Note: You must provide all documentation listed. If there is documentation you cannot provide, you must address this in your personal statement.

_____ *CHANGE IN JOB STATUS* (Dislocated Worker, Loss of Job)

Documentation required:

- Personal statement explaining the circumstances on which your appeal is based
- Copy of letter of termination
- Copy of letter describing unemployment benefits
- Documentation of severance pay (If none, indicate no benefits received in personal statement)
- NOTE: Depending on your initial request, you should expect to provide additional income documentation for this request.

_____ *LOSS OF BENEFITS* (Child Support, Alimony, Social Security, and Disability)

Documentation required:

- Personal statement explaining the circumstances on which your appeal is based
- Signed statements documenting termination of benefits from the appropriate organization or department
- Documentation of current monthly income (including Social Security, Veteran's or other benefits)

_____ *MEDICAL/DENTAL EXPENSES* not covered by insurance

Documentation required:

- Personal statement explaining the circumstances on which your appeal is based
- Receipts of all medical and dental payments that you have made beyond what your insurance has paid. (You must provide proof that you've paid these bills through personal check stubs or bank statements.)
- Documentation of current monthly income (including Social Security, Veteran's or other benefits)

_____ *SEPARATION/DIVORCE* or *DEATH* of a spouse or parent (**after** the original 2023-2024 FAFSA was submitted). must be included on the FAFSA under normal circumstances

Documentation required:

- Personal statement explaining the circumstances on which your appeal is based
- Separation statement or divorce papers, death certificate or notice
- Individual tax returns or W-2's 2021

_____ *ONE-TIME INCOME* (i.e. moving expense allowance, back year Social Security payments, or lump sum retirement or IRA distribution)

Documentation required:

- Personal statement explaining the circumstances on which your appeal is based
- You must attach a separate sheet that identifies source of income and how funds were spent or invested with supporting documentation

_____ *OTHER* (circumstances not listed on this form). Documentation required: Provide personal statement and all supporting documentation you feel necessary for your appeal. Please Note that additional information may be required once request is reviewed.

Section III: Verification

1. All submitted documentation will be reviewed by the Financial Aid Administrator.
 2. An official notification of the Administrator's decision will be sent to the student along with an explanation of any further action necessary to complete his/her application for aid.
 3. If the student has filed a FAFSA for the year under review, the Financial Aid Administrator will make any necessary corrections to the FAFSA.
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Section IV

I certify that the information listed on the form and all supporting documents concerning my request for this request is correct and complete.

Student's Signature Date Spouse's Signature Date

Father's Signature Date Mother's Signature Date

For Official Use

Appeal Approved _____ Appeal Denied _____ More information needed _____

Did student provide all documentation to support appeal? _____

Notes: _____