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STUDENT NAME

UMass Global ID NUMBER

You may request reconsideration of your financial aid award if your financial circumstances have changed significantly or you have special circumstances that were not reported on your initial financial aid application. Changes resulting from this review do not guarantee an increase in aid.

What is the change in circumstance? (check all that apply)

	Termination or other employment change		Elder care expenses
	Retirement or Disability		Child care expenses
	Loss of untaxed income (child support, SSI, etc)		Disability expenses
	Recent divorce or separation		Other (explain in personal statement)
	Medical/dental bills not covered by insurance		

Supporting documentation included (check all that apply)

	Severance letter		Medical/dental bills showing unreimbursed amount
	Most recent paystub showing changed salary		Disability benefits statement
	Final paystub from previous employer		Child care expense receipts
	Unemployment benefits statement		Other
	2021 Federal Income Tax Return		

Do you (or someone in your household) receive any of the following assistance? If yes, please provide documentation of benefits

	Medicaid or Supplemental Security Income (SSI)		Temporary Assistance for Needy Families (TANF)
	Supplemental Nutrition Assistance Program (SNAP)		Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)
	Free or Reduced Price School Lunch		

Personal Statement:

Attach a personal statement explaining your circumstances. Please provide as much detail as possible to help us better understand your changed financial situation.

Substantial changes in 2022 and/or 2023 income:

If your review request is based on a substantial **change to income in 2022:**

- Include a copy of your 2021 federal tax return along with your documentation.

If your review request is based on a substantial **change to your income in 2023:**

- Itemize below all sources of income, both taxed and untaxed, that you expect to receive in 2022. Use pre-tax income figures and include a number for each item; if the amount is zero, put \$0.

Anticipated 2023 income source:

2023 pre-tax amount:

Student's wages, salaries, tips	\$
Spouse's wages, salaries, tips	\$
Interest income or dividends	\$
Alimony received	\$
Net income from business or farm	\$
Net rental income (or loss)	\$
Pensions, annuities, royalties, partnerships, estates, trusts, etc.	\$
IRA distributions	\$
Capital gains (or losses)	\$
Unemployment compensation, severance pay, etc.	\$
Other taxable income (specify sources: _____)	\$
Child support received	\$
Contribution to tax-deferred retirement plans (401k, 403b, etc.)	\$
Untaxed disability income or Social Security Income	\$
Other untaxed income (specify sources: _____)	\$
TOTAL:	\$

I CERTIFY THE SUBMITTED INFORMATION IS TRUE AND CORRECT TO THE BEST OF MY KNOWLEDGE AND BELIEF. I HAVE READ EACH SECTION AND HAVE PROVIDED THE REQUIRED DOCUMENTATION. I UNDERSTAND THAT UNDERESTIMATING PROJECTED INCOME COULD RESULT IN REDUCED ELIGIBILITY AND/OR REPAYMENT OF AID AND/OR DENIAL OF FUTURE REVIEWS/APPEALS.

STUDENT SIGNATURE (wet signature)

DATE

Submit completed form with supporting documents via the Student Portal or by:
Fax: 866-659-1147 Mail: UMass Global, Financial Aid Office, Third Floor 16355 Laguna Canyon Rd, Irvine, CA
92618