University of Central Missouri
Student Financial Services
P.O. Box 800
Warrensburg, MO 64093-5178
Phone 660-543-8266
FAX 660-543-8080
On-line: www.ucmo.edu/sfs
Documents Only Email:
financialassistance@ucmo.edu

Recalculation of Federal Financial Aid Eligibility

2022/2023

_____   700_____
Student's Name (please print)   UCM ID Number

Permanent/Home Mailing Address:

_____   _____ _____ _____
Number/Street/Apt.   City   State   Zip Code

_____   _____
Permanent/Home Telephone #   Student Telephone or Cell #

If you or your parents' total gross income will be significantly lower in the 2022 calendar year than what it was for the 2020 calendar year used on the 2022-2023 FAFSA, you may appeal through the submission of this Recalculation of Federal Financial Aid Eligibility form with supporting documentation. Appeals are reviewed by a committee and are handled on a case-by-case basis

- Respond completely and accurately to **all items on both pages** of this document.

- Submit all required documents.

- Submit copies of both you and your parents' 2020 **tax return transcripts or signed tax returns**. If you have not already submitted these documents to our office for FAFSA verification, order a tax return transcript at **www.irs.gov/Individuals/Get-Transcript** or by calling **1-800-908-9946**. (Hard copies of tax return transcripts are required even if you/your parent utilized the IRS Data Retrieval Tool when completing the FAFSA.)

The **total gross income and/or benefits** received by me, my parent(s), and/or my spouse **will be lower** for the **2022 calendar year** (January through December) than it was for the **2020** calendar year: (2020 is used as it is the same tax year you used for your FAFSA.)

1. This reduction in gross income and/or benefits occurred for (check all that apply): ___ me, ___ my spouse, ___ my father/step-father, and/or ___ my mother/step-mother.

2. This reduction in gross income/benefits was caused by (mark only one):

___ A change in employment or unemployment.
   Documents Needed: (additional documentation may be requested)
   o   Personal (signed) Letter of Explanation detailing circumstances
   o   2020 W-2(s) (student, spouse, and/or parent(s))
   o   Final pay-stub showing YTD earnings for whomever the income has been reduced or lost (if applicable)
   o   Termination Letter on company letterhead with signature and contact information
   o   Unemployment Benefits Statement (if applicable)
   o   Current pay-stub showing YTD earnings for whomever the loss occurred (if applicable)
___ Divorce or separation on the following date: _____
   Documents Needed: (additional documentation may be requested)
   o   A copy of 2020 Missouri tax return
   o   A copy of divorce decree, legal separation agreement, letter from attorney or other professional (counselor, member of clergy, etc., written on professional letterhead stationary), or current billing statements showing separate addresses for each party is also required.

___ Retirement.
   Documents Needed: Please provide separation letter, copies of 2020 W-2 for retiree, current 2022 statement of benefits such as social security, IRA distributions, or other means of funding.

__ Death of an individual on the following date: _____

Documents Needed: (additional documentation may be requested)
- o   A copy of the death certificate
- o   A copy of the 2020 Missouri state tax return
- o   An explanation of any life insurance benefits already received or anticipated due to the death.

__ Disability:

Documents Needed: (additional documentation may be requested)
- o   Attach a (signed) letter of explanation, indicating the type(s) and amount(s) of benefits lost and how long the benefits were/will be received during the **2022** year.
- o   Submit a copy of any documentation verifying the disability.

__ Loss of financial benefits:

Documents Needed: (additional documentation may be requested)
- o   Attach a (signed) letter of explanation about the type(s) and amount(s) of benefits lost, and how long the benefits were/will be received during the **2022** year.
- o   Submit a copy of any documentation verifying this loss of financial benefits.

3.   If **other circumstances beyond your control** caused (or will cause) your and/or your family's financial resources to be lower for the 2022 calendar year than they were in 2020, **attach a (signed) letter of explanation** and **include documentation verifying these circumstances**.

The following information MUST be provided.
Enter '0' if there will be no expected gross income or benefit for that item.

Following are the **total gross income and benefits expected to be received during the 12-month 2021 calendar year** (January through December) for **all** family members:

Earnings from employment - student .... $ _____

Earnings from employment – spouse (if applicable) .... $ _____

Earnings from employment - mother/stepmother.................................... $ _____

Earnings from employment - father/stepfather....................................... $ _____

Child Support received .... $ _____

Unemployment Benefits .... $ _____

Disability Benefits .... $ _____

Veteran Benefits .... $ _____

Other (submit a signed letter of explanation) .... $ _____

        Total for the 12-month 2022 calendar year . . . . $ _____

I (we) certify the information provided on (and included with) this request is **true and accurate** to the best of my (our) knowledge. I (we) promise to notify UCM Student Financial Services if the above information changes **after** this document has been submitted. I (we) understand any adjustments made by the UCM Office of Student Financial Services **may or may not** result in an increase in my federal financial aid eligibility.

Student Signature _____ Date _____

Spouse Signature _____ Date _____

Father/Step-father Signature _____ Date _____

Mother/Step-mother Signature _____ Date _____

Complete and submit this form and **all supporting documents** to UCM **Student Financial Services** in person (1100 Ward Edwards Bldg.), or by mail (Student Financial Services, P.O. Box 800, Warrensburg MO 64093-5178), or by fax (660-543-8080). **If all documentation has not been submitted there will be delays in processing.**

=========== **UCM Student Financial Services Use Only** ===========

[   ] Approved   [   ] Denied   Counselor Signature: _____