



# UNIVERSITY OF ARKANSAS RICH MOUNTAIN

OFFICE OF FINANCIAL AID

## 2022-2023 Request for Reconsideration Based on Extenuating Circumstances

This form may be used for the 2022-2023 academic year if the financial situation used in completing the Free Application for Federal Student Aid (FAFSA) has changed or if you have unusual circumstances for 2022-2023.

Student Name \_\_\_\_\_ SSN \_\_\_\_\_

### Check all that apply:

#### If you are an Independent student:

- ☐ Loss of employment or change of employment status for you or your spouse.
- ☐ Divorce, separation, or death of spouse.
- ☐ Loss of untaxed income (social security, pension, etc.)
- ☐ Unusual medical or dental bills or handicapped-related expenses.
- ☐ One-time payment which over inflated your annual income.
- ☐ Other \_\_\_\_\_

#### If you are a Dependent student:

- ☐ Loss of employment or change of employment status for you or a parent(s).
- ☐ Divorce, separation, or death of a parent.
- ☐ Loss of untaxed income (social security, pension, etc.)
- ☐ Unusual medical or dental bills or handicapped-related expenses.
- ☐ One-time payment which over inflated your annual income.
- ☐ Other \_\_\_\_\_

Please complete the chart below indicating all sources of income **YOU EXPECT** to receive for the time January 1, 2022, through December 31, 2022.

| Income for 2022                          | Student and/or Spouse | Parent |
|------------------------------------------|-----------------------|--------|
| Wages, salaries, severance pay from work | \$                    | \$     |
| Other taxable income                     | \$                    | \$     |
| Unemployment benefits to be received     | \$                    | \$     |
| Alimony                                  | \$                    | \$     |
| Disability Benefits                      | \$                    | \$     |
| Workers Compensation                     | \$                    | \$     |
| Untaxed Social Security Benefits         | \$                    | \$     |
| Welfare Benefits                         | \$                    | \$     |
| Child Support                            | \$                    | \$     |
| Other Untaxed Income                     | \$                    | \$     |
| <b>Total Income for 2022</b>             | \$                    | \$     |

All the information on this form and supporting documents is true and complete to the best of my knowledge.

\_\_\_\_\_  
Student Signature                      Date

\_\_\_\_\_  
Parent Signature                      Date

Provide documentation that supports the reason you are requesting reconsideration based on extenuating circumstances.

**SEE REVERSE SIDE**

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## Required Documentation for Extenuating Circumstances

- 1. Loss of employment or change in employment status (Attach the following to this form)**
  - ☐ Signed statement from the student explaining reason for unemployment
  - ☐ Last pay stub showing year to date earnings for 2022 or a statement from your previous employer documenting year to date income
  - ☐ Documentation of all untaxed income received in 2022
- 2. Divorce or separation of student or parent (attach the following to this form)**
  - ☐ Divorce decree (copy)
  - ☐ Separation – copy of legal separation document, a signed statement from your attorney showing the date of separation, or a statement from an unrelated third party
- 3. Death of a spouse or parent (attach the following to this form)**
  - ☐ A death certificate or an obituary notice
- 4. Loss of untaxed income (attach the following to this form)**
  - ☐ A copy of a letter from the agency that provided benefits detailing termination of benefits and copies of summaries of benefits
- 5. Unusual medical or dental bills or handicapped-related expenses (attach the following to this form)**
  - ☐ A copy of schedule A of the Federal 1040 form
  - ☐ Canceled checks or receipts showing amount paid with statement from insurance company showing expenses were not reimbursed
- 6. One time payments that caused income to be overstated (attach the following to this form)**
  - ☐ Detailed written explanation and documentation
- 7. Other:**
  - ☐ Pertinent documents supporting your request for reconsideration

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**Submit request form and all other required documents to the following address:**

UA Rich Mountain  
Financial Aid Office  
1100 College Drive  
Mena, Arkansas 71953