A. Student Information

<table>
<thead>
<tr>
<th>First name</th>
<th>Last name</th>
<th>SFSU ID</th>
</tr>
</thead>
</table>

San Francisco State University understands that special circumstances occur which may affect a student's financial aid eligibility. The Financial Aid Special Circumstances Committee will review each request for change on an individual basis. Please note that submission for review will not guarantee changes in financial aid eligibility nor prevent any late charges that may be applied to a student's University fee balance. All decisions are final.

Please be aware, if you already have a 0 (zero) EFC you will not be eligible for this appeal as you are already receiving the maximum amount of federal aid available. Your EFC is 0 if your Pell award is $6,345 for the 20-21 academic year. You can also verify your EFC in the Student Aid Report emailed to you after FAFSA completion or in your Student Center.

**COVID-19 Pandemic-Related Appeals:** The COVID-19 pandemic has impacted students’ and families' incomes with pay reductions and job losses. Given the sudden nature of this emergency, you might not be able to include extensive documentation for your situation. Please complete this form as best you can with the information and documentation that you have available, and our counselors will work with you to understand and address your circumstances. On Section C of the Petition form, please report the parents' (and if applicable the student’s) projected income from July 1, 2020 - June 30, 2021. The student's financial aid eligibility will be recalculated using the reported projected income for this time period. If the projected income results in increased eligibility the student’s financial aid offer will be revised accordingly. Please note you may need to submit additional supporting documents of your projected income during the Fall semester.

**The following are examples of special circumstances:**
- Loss or reduction of wages
- Divorce or separation of parents (legal documentation must be submitted)
- Loss of child support

**The following do not constitute special circumstances:**
- Reduction in 401K values
- Reduction in investment values
- Debt to income ratios
- Parents' refusal to contribute to the student's education
- Parent's inability or unwillingness to borrow Parent PLUS loans
- Lack of credit worthy co-signers
B. Explanation of Re-Evaluation

Please use the area below to explain the reason why this special request is being made and explain the specific fiscal impact (attach a separate page if necessary).
C. Reduction of Income or Job Loss for 2020-2021

Please complete the table below and provide documentation if you have experienced a job loss or reduction of income.

**Date of termination or reduction:** ____________________________

<table>
<thead>
<tr>
<th>2020-2021 Gross Income</th>
<th>07/01/2020 12/31/2020</th>
<th>+</th>
<th>01/01/2021 06/30/2021</th>
<th>=</th>
<th>2020-2021 Total Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wages, salaries, tips:</td>
<td></td>
<td>+</td>
<td></td>
<td>=</td>
<td></td>
</tr>
<tr>
<td>Father/Stepfather</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mother/Stepmother</td>
<td></td>
<td></td>
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<td></td>
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<tr>
<td>Student (if applicable)</td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Spouse (if applicable)</td>
<td></td>
<td></td>
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<td></td>
<td></td>
</tr>
<tr>
<td>Net income or loss from business or farm:</td>
<td>+</td>
<td>=</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Unemployment benefits:</td>
<td></td>
<td>+</td>
<td></td>
<td>=</td>
<td></td>
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<tr>
<td>Severance pay:</td>
<td></td>
<td>+</td>
<td></td>
<td>=</td>
<td></td>
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<tr>
<td>Other taxable income:</td>
<td></td>
<td>+</td>
<td></td>
<td>=</td>
<td></td>
</tr>
<tr>
<td>Other untaxed income:</td>
<td></td>
<td>+</td>
<td></td>
<td>=</td>
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</tbody>
</table>

Other untaxed income may include Child Support, IRA Deductions, IRA Distributions, Veterans Disability Benefits, Worker’s Compensation, Untaxed Foreign Income, Death Pension, Other Pension

Please also submit the appropriate documentation that supports your explanation for this request. These may include (but are not limited to):

☐ Statement from employer regarding termination
☐ Pay stub reflecting change in income or wages
☐ New employer pay stub showing new wages
☐ Documentation of unemployment benefits
☐ Certificate of divorce or separation
☐ Business tax returns and balance sheets
☐ Documentation of Untaxed Income
Any incomplete request forms will not be reviewed until all necessary documentation has been submitted. Once your request is complete, you will be notified via e-mail of the outcome. The review process may be extended if there is more documentation or clarification needed for the file.

D. Signatures

By signing, I have certified that the information provided on this form is true and correct to the best of my knowledge. I understand that this does not guarantee any changes in the original financial aid package offered, late fees accrued on any remaining account balance are my sole responsibility, and some aid may adjust should I be offered other sources of financial aid. I also understand that if there is any additional financial aid awarded, it will be a one-time only offer.

* ____________________________________________________________________________

Student Signature

Date

Parent Signature *(required for dependent students)*

Date