



# UNIVERSITY OF ARKANSAS RICH MOUNTAIN

OFFICE OF FINANCIAL AID

## 2024-2025 Request for Reconsideration Based on Extenuating Circumstances

This form may be used for the 2024-2025 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 2024-2025.

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, 2024, through December 31, 2024.

Income for 2024	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 2024</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**

---

## 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 2024 or a statement from your previous employer documenting year to date income
- Documentation of all untaxed income received in 2024

**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

---

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

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