

2022-2023 Financial Aid Appeal Request Form

An appeal is a formal request to re-evaluate a family's financial aid package if you have experienced a change in your financial situation or are encountering special circumstances not already included in your application. Please review the following list of eligible appeal circumstances and follow the instructions in the referenced section. **(NOTE: You do not need to complete and submit this whole packet. You will only need to follow the instructions in the section(s) relevant to your situation.**

Eligible Appeal Circumstances	Instructions
Other need-based award letter (new students only)	Complete and submit Section 1 along with required documentation
Medical expenses not previously reported on the CSS Profile	Complete and submit Section 2 along with required documentation.
Repayment of student loans for parent(s)' education	Complete and submit Section 3 along with required documentation.
Financial support for relatives not previously reported on the CSS Profile	Complete and submit Section 4
Funeral expenses	Complete and submit Section 5
Back-tax payments	Complete and submit Section 6 along with required documentation.
New information regarding a sibling's college enrollment or primary/secondary school costs	Complete and submit Section 7 along with required documentation.
Natural Disaster Costs	Complete and submit Section 8 along with required documentation.
One-time and non-recurring income/assets (e.g. severance package, etc.)	Complete and submit Section 9 along with required documentation.
Loss of employment which has/will reduce your family's income from the amount received in 2020	Complete and submit Section 10 along with required documentation.

If your circumstances are not reflected in the list above, please email our office at ugrad-finaid@columbia.edu to consult with one of our officers.

How to submit materials

The relevant appeal form pages and supporting materials should be returned in one packet, when possible, using the following methods:

Fax: 212-854-5353

Email: ugrad-finaid@columbia.edu. Note: DO NOT submit materials with sensitive information (SSN, date of birth, etc.) by email.

Student Name _____

CUID _____

Parent Name _____



Section 1: Other Need-based Award Letter (new students only)

While it is not our policy to automatically match financial aid offers from other schools, we will review other need-based packages to determine if a change may be appropriate. Please note that we will not consider merit-based aid or athletic scholarships, as Columbia only provides need-based financial aid.

 Is the aid awarded in the other school's letter need-based? ☐ Yes ☐ No

If yes, please provide the name of the institution(s): _____

Required Documentation

- Complete Section 1 and return this page with a copy of your need-based award letter(s):
 NOTE: Letters should include the Cost of Attendance, family contribution and package.



Section 2: Unreported Medical Expenses

List the amount of unreimbursed medical expenses your family paid that was not or will not be covered by insurance.

Year	2020	2021	2022
Amount of unreimbursed payments			

 Does your family anticipate similar medical expense payments in future years? Yes ☐ No ☐

 Were these medical expenses reported on your family's most recently filed tax returns? Yes ☐ No ☐

Steps and Required Documentation

- Complete Section 2 and return this page.
- Provide an explanation of your circumstances below.
- Submit Receipts for unreimbursed medical payments (note that amounts due and not paid yet will not be considered).

Explanation:



Section 3: Repayment of Student Loans for Parent(s)' Education

We can account for payments made towards student loans your parent(s) borrowed for their own education.

Required Documentation

- Complete the table below and return this page with receipts or an end of year summary listing the loan payments.

	2020	2021	2022
Loan payment amounts			

Student Name _____

CUID _____

Parent Name _____



Section 4: Financial Support for Relatives

If your family financially supports relatives outside of your immediate household, please complete the table below.

Required Documentation

- Complete the table in Section 4 and return this page.

				Amount of Support Provided		
Name	Age	Relation	City of Residence	2020	2021	2022



Section 5: Funeral Expenses

In the explanation box below, please list the name of the family member who passed away, the amount of support provided by your parent(s) for funeral costs, and the year in which it was provided.

Required Documentation

- Detail your circumstances in the explanation box below and return this page.

Explanation:



Section 6: Back-tax Payments

If your parent(s) are making back-tax payments for a prior tax year, please follow the steps below:

Required Documentation

- Detail your circumstances in the explanation box below and return this page.
- Submit receipts or end of year summary listing back-tax payments made in 2020, 2021 and/or 2022.
 NOTE: Documentation that lists back-tax payments due without listing the amount paid will not satisfy this documentation requirement.

Explanation:

Student Name _____

CUID _____

Parent Name _____



Section 7: Sibling's Education Costs

If your sibling has had a change in education plans that will increase your parent's costs, or if you forgot to include sibling primary or secondary tuition expenses in your application, please follow the steps below. Note: Expenses for after-school programs or extra-curricular expenses will not be considered.

Required Supporting Documentation

- Provide an explanation of this change in circumstances below and submit this page.
- Submit documentation of the expected tuition cost to your parent(s)
 - For siblings who are switching from a public undergraduate school to a private undergraduate school, submit their financial aid letter, confirmation of enrollment or billing statement.
 - For siblings who will have an increased parent(s)' cost for primary or secondary school, submit an award letter or billing statement
 - For younger siblings who have a daycare expense, please submit a billing contract or monthly statement.

Explanation:



Section 8: Natural Disaster Costs

Please follow the steps below:

Required Supporting Documentation

- Provide an explanation of your circumstances below and submit this page.
- Insurance statements showing what was and was not covered by insurance
- Receipts for non-reimbursed repairs

Explanation:

Student Name _____

CUID _____

Parent Name _____



Section 9: One-time or Non-recurring Income

Please be aware that we do not adjust aid eligibility for variations in recurring bonuses.

Do any of the following circumstances apply to your family's one-time or non-recurring income/assets?

- ☐ A large rollover distribution between retirement accounts.
- ☐ A retirement-based distribution used to pay off financial expenses.
- ☐ A one-time occupational bonus, contract, or severance package.

Did you make a similar distribution on your most recently filed tax returns?

- ☐ Yes
- ☐ No

Required Supporting Documentation

- Provide an explanation of your circumstances below, including how the income was used, and submit this page.
- If filed, submit a copy of your 2021 tax return, including all schedules and business returns, if applicable
- Other documentation noting the one-time or non-recurring income (e.g. paystub)

Explanation:

Student Name _____

CUID _____

Parent Name _____

☐ Section 10: Change or Loss of Employment

The Alternate Tax Year appeal is available to families who have experienced an involuntary loss of employment or reduction in income since 2020. This appeal allows you to request a re-evaluation of your financial aid package using the figures from your parent(s)' finalized 2021 or 2022 tax return or your parent(s)' estimated 2021 or 2022 income. If your appeal is approved based on your parent(s)' estimated income, you will be required to submit their finalized tax documentation. Please note the deadlines listed in the instructions below.

All parent(s) noted in your application will be required to submit documents for the tax year in question. If your parent(s) file separately (whether they live together or apart), both parents will be required to submit the supporting documentation listed below. If we use a more recent tax year for a custodial parent, we will also use that tax year for the noncustodial parent and vice versa. Both households will be required to separately follow the steps in the chosen option below.

Question 1: Do any of the following circumstances apply to your family's change or loss of employment?

- ☐ A change or loss in income due to a medical emergency or injury.
- ☐ A change or loss in income due to a termination, downsizing, or relocation.
- ☐ A change or loss in income due to the retirement of one or more income earners.
- ☐ None of the above circumstances applies to my request for a re-evaluation.

Question 2: Which tax returns have your parent(s)' filed? (This appeal form is valid through May 2023).

- ☐ 2020
- ☐ 2021
- ☐ 2022

Required Documentation: Select one of the options below and complete the requirements listed under that option.

- Option 1: Instructions for a re-evaluation with 2021 estimated income (2021 tax return not yet filed):
 Complete and submit this page and the Alternate Tax Year Worksheet on pages 7-8
 Submit copies of your parent(s)' most recent paystubs
 Submit a copy of their termination letter (if applicable)
 Submit a copy of their severance letter (if applicable)
 If your parent(s)' filed Schedules C, E, or F in your 2020 return, they will need to submit draft 2021 schedules. NOTE: Finalized tax returns must be submitted by June 1, 2022.
- Option 2: Instructions for a re-evaluation with 2021 finalized federal tax return(s):
 Submit a copy of your parent(s)' finalized 2021 federal tax return, including all schedules and business returns (if applicable).
 Submit copies of your parent(s)' 2021 W2 forms for income listed on Line 1 of their Form 1040.
 Respond to Questions 1 and 2 in this section and return this page with an explanation of your circumstances.
- Option 3: Instructions for a re-evaluation with 2022 estimated income (2022 tax return not yet filed):
 Complete and submit this page and the Alternate Tax Year Worksheet on pages 7-8
 Submit copies of your parent(s)' most recent paystubs
 Submit a copy of their termination letter (if applicable)
 Submit a copy of their severance letter (if applicable)
 If your parent(s) filed Schedules C, E, or F in your 2020 return, they will need to submit draft 2022 schedules
 NOTE: Finalized tax returns must be submitted by March 1, 2023.

2022-2023 Alternate Tax Year Worksheet

STUDENT NAME: <input style="width: 90%;" type="text"/>	CUID #: <input style="width: 90%;" type="text"/>
PARENT I NAME: <input style="width: 90%;" type="text"/>	PARENT II NAME: <input style="width: 90%;" type="text"/>

We are collecting this information to gain a better understanding of your family's financial circumstances. Your initial financial aid eligibility will be based on the 2020 tax year. If we decide to use estimated 2021 information, we will require copies of the parents' 2021 federal income tax returns by June 1, 2022. If we decide to use estimated 2022 information, we will require copies of the parents' 2022 federal income tax returns by March 1, 2023. If the respective filed returns are not received by the deadline, we will revert to the 2020 information. If actual 2021 or 2022 income is higher than projected, the financial aid award may be adjusted appropriately. We re-evaluate need-based financial aid eligibility each academic year.

INSTRUCTIONS: This is a fillable form. Please enter your actual 2020 information from your tax return, and complete the 2021 and 2022 columns with actual or estimated information. There are separate sections for taxable income; adjustments, deductions, and taxes paid; and untaxed income. Please check your numbers against current paystubs and adjust taxes paid to reflect the actual/expected increase/decrease in income. Attach documents (recent paystubs; job loss documentation; etc.) supporting your estimates.

TAXABLE INCOME	2020	2021	2022	Where to Find
	<input type="checkbox"/> Actual	<input type="checkbox"/> Actual <input type="checkbox"/> Estimate	<input type="checkbox"/> Actual <input type="checkbox"/> Estimate	IRS 1040, Schedule 1 & W2
Parent 1 Wages				W2 Box 1
Parent 2 Wages				W2 Box 1
Interest Income				1040, Line 2b
Dividend Income				1040, Line 3b
IRAs, Pensions and Annuities				1040, Line 4b + 5b
Social Security Benefits				1040, Line 6b
Tax Refunds				Schedule 1, Line 1
Alimony Received				Schedule 1, Line 2a
Schedule C Business Income(s)				Sch C(s) Line 31 (total positive income)
Schedule C Business Loss(es)				Sch C(s) Line 31 (total negative income)
Schedule D Capital Gain or (Loss)				1040, Line 7
Other Gain or (Loss)				Schedule 1, Line 4
Schedule E/F Business Income(s)				Total the positive income from the following fields: Sch E Lines 24 + 30 + 35 + (39 + 40 if positive) + Sch F Line 34
Schedule E/F Business Loss(es)				Total the negative income from the following fields: Sch E Lines 25 + 31 + 36 + (39 + 40 if negative) + Sch F Line 34 (if negative)
Unemployment Compensation				Schedule 1, Line 7
Other Income (including Foreign Earned)				Schedule 1, Line 8
Severance Pay not already included in W2				
Taxable Disability Benefits				Included in Social Security?
TOTAL TAXABLE INCOME				

TAX SUMMARY	2020	2021	2022	Where to Find
	<input type="checkbox"/> Actual	<input type="checkbox"/> Actual <input type="checkbox"/> Estimate	<input type="checkbox"/> Actual <input type="checkbox"/> Estimate	IRS 1040, Schedule 1 & Schedule 3
Adjustments to Income				1040, Line 10a
Adjusted Gross Income				1040, Line 11
Standard/Itemized Deductions				2020 1040, Line12; 2021 1040, Line12c
Unreimbursed Medical and Dental Expenses				Schedule A, Line 1
State and Local Taxes				Schedule A, Line 5d
U.S. Income Tax Paid				1040, Line 22
Nondeductable Alimony Paid & Child Support Paid				

UNTAXED & PRE-TAX INCOME	2020	2021	2022	Where to Find
	<input type="checkbox"/> Actual	<input type="checkbox"/> Actual <input type="checkbox"/> Estimate	<input type="checkbox"/> Actual <input type="checkbox"/> Estimate	IRS 1040 + W2
Tax-Exempt Interest Income				1040, Line 2a
IRA Distributions/Pension/Annuities				1040, Line 4a -4b + 5a -5b
Social Security Benefits				1040, Line 6a - 6b
SEP/SIMPLE + IRA + HSA Deduction				Schedule 1, Line 13+16+20
Pre-Tax Retirement Contributions: 401(k), 403(b) etc.				W2 Box 12 Codes D + E + F + G + H + S
Pre-Tax Flexible Spending Accounts				W2 Box 12 Code W
Child Support Received				
Untaxed Disability Benefits				Not included in Social Security
Public Assistance				TANF, SSI, EIC, etc.
Other Untaxed Income (e.g. loans/gifts from family, etc.)				Please explain below.
TOTA UNTAXED INCOME				

TOTAL TAXABLE AND UNTAXED INCOME				
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SPECIAL CIRCUMSTANCES (Please attach an additional sheet if necessary):

CERTIFICATION: All the information on this form is true and complete to the best of my knowledge. If asked, I agree to give proof of the information that I have given on this form. I realize that this proof may include a copy of my U.S., state or local income tax returns. I certify that all information is correct at this time, and that I will send timely notice to the college of any significant change in family income or assets, financial situation, college plans of other children, or the receipt of other scholarships or grants.

SIGNATURE of PARENT _____ DATE _____

SIGNATURE of PARENT _____ DATE _____

Please save a copy of the completed form for your records as it will assist you when completing the official paperwork later on.

Family Income and Expense Worksheet – 2020

You will only need to complete this form if we specifically ask for it. This form is intended to correlate your family's annual income sources and expenses. Make sure to list all sources of income for the calendar year, including gifts from relatives, and government benefits. Please also provide documentation of any government assistance you may have received during the year. If your expenses exceeded your income, please provide an explanation as to how you funded your expenses for the year.

Student Name: _____ **Columbia ID:** _____

Income: Please list all sources of income received in 2020.

Wages (box 1 of your W-2 statements): _____	Prior year tax refund: _____
Dividend and Interest income: _____	Government Benefits (SNAP, TANF, etc.): please specify type of assistance and amount received for each: _____ _____
Net business income: _____	
Unemployment compensation: _____	
Social Security Income: _____	Gifts from family or friends: _____ _____
Alimony received: _____	
Pension/IRA distributions: _____	Other income: Please clarify source and amount: _____ _____
Child support received: _____	

Expenses: Please list all annual expenses paid in 2020.

TOTAL Income: _____

Household Expenses	Household Expenses, cont'd	Taxes; Other
Rent/mortgage: _____	Food: _____	Federal Taxes: _____
Education Loan repayment: _____	Transportation: _____	State/Local Taxes: _____
Car payments: _____	Utilities: _____	Real Estate Taxes: _____
Credit Card payments: _____	Telephone: _____	Union Dues: _____
Homeowner's/Renter's Insurance: _____	Medical/Dental: _____	Child Support/Alimony paid: _____
Health Insurance: _____	Clothing/Laundry: _____	
Life Insurance: _____	Home maintenance: _____	Out-of-pocket expenses for relatives: please specify: _____ _____
Car Insurance: _____	Charitable contributions: _____	
Sibling elementary/secondary school tuition expenses: _____	Recreation/entertainment: _____	

TOTAL Expenses: _____

If your expenses exceed your income, please provide clarification on a separate page.

Student Signature _____

Date _____

Parent Signature _____

Date _____

Family Income and Expense Worksheet – 2021

You will only need to complete this form if we specifically ask for it. This form is intended to correlate your family's annual income sources and expenses. Make sure to list all sources of income for the calendar year, including gifts from relatives, and government benefits. Please also provide documentation of any government assistance you may have received during the year. If your expenses exceeded your income, please provide an explanation as to how you funded your expenses for the year.

Student Name: _____ **Columbia ID:** _____

Income: Please list all sources of income received in 2021.

Wages (box 1 of your W-2 statements): _____	Prior year tax refund: _____
Dividend and Interest income: _____	Government Benefits (SNAP, TANF, etc.): please specify type of assistance and amount received for each: _____ _____
Net business income: _____	
Unemployment compensation: _____	
Social Security Income: _____	Gifts from family or friends: _____ _____
Alimony received: _____	
Pension/IRA distributions: _____	Other income: Please clarify source and amount: _____ _____
Child support received: _____	

Expenses: Please list all annual expenses paid in 2021.

TOTAL Income: _____

Household Expenses	Household Expenses, cont'd	Taxes; Other
Rent/mortgage: _____	Food: _____	Federal Taxes: _____
Education Loan repayment: _____	Transportation: _____	State/Local Taxes: _____
Car payments: _____	Utilities: _____	Real Estate Taxes: _____
Credit Card payments: _____	Telephone: _____	Union Dues: _____
Homeowner's/Renter's Insurance: _____	Medical/Dental: _____	Child Support/Alimony paid: _____
Health Insurance: _____	Clothing/Laundry: _____	
Life Insurance: _____	Home maintenance: _____	Out-of-pocket expenses for relatives: please specify: _____ _____
Car Insurance: _____	Charitable contributions: _____	
Sibling elementary/secondary school tuition expenses: _____	Recreation/entertainment: _____	

TOTAL Expenses: _____

If your expenses exceed your income, please provide clarification on a separate page.

Student Signature _____

Date _____

Parent Signature _____

Date _____