

Financial Aid Appeal Request Form

(check your reason(s) for requesting an appeal) Change in Student Resources Change in Parent Resources Student Name: ______ UWEC ID # (if known): _____ Social Security Number (last four digits only): _____ The Financial Aid Office has established an appeal process to allow for a possible recalculation of financial need based on special or unusual circumstances. It is important for you to know that not all changes in circumstance will result in an adjustment to your financial aid eligibility. However, if you are interested in pursuing an appeal, please describe in detail (including dates) your reason for filing an appeal. Return the completed form to 115 Schofield Hall. If it is being returned by postal mail, send the form to: **UW-Eau Claire Financial Aid Office** PO Box 4004 Eau Claire, WI 54702-4004 A counselor will contact you regarding the next step in the appeal process. *The student must file a current year FAFSA (Free Application for Federal Student Aid) before an appeal may be processed. And so, please make sure this step has been completed before submitting the Appeal Request to the Financial Aid Office. **Explanation for requesting an appeal** (attach additional pages if necessary): The individual filing this appeal: ______ (please print) Daytime Phone Number: _____ E-mail (optional):_____

Signature: ______ Date: _____