



Office of Financial Aid
EMAIL: faappeal@cooper.edu
FAX: 917-793-3304
41 Cooper Square
New York, NY 10003

Circumstance **TWO**: 2023-2024 Financial Aid Appeal Request for Consideration

The review of your request will not begin until all documentations are submitted, and it may take approximately six weeks to be processed.

Please be advised that all financial aid appeal requests are at the discretion of the office of financial aid. Decisions are final and cannot be re-appealed unless new circumstances are presented.

The decision on this appeal is only valid for the academic term/year in which you applied.

Student Name: _____ Student ID # : _____

All requests must include applicable supporting documents.

- Copy of the 2021 and 2022 (if applicable) signed completed Federal Tax Return and all W-2s for the student and parent (if applicable)
- Completed 2023-2024 Verification Worksheet (If selected for verification)
- Letter explaining in detail the circumstances and the reason for your appeal.
- Additional documentations if requested.

Check the reason(s) that best describes your situation and provide all requested documentation.

Unemployment: Person's Name: _____

Relationship to Student _____

- Please write a statement explaining the beginning and end date of all employment. Also, indicate the beginning and end date of any unemployment compensation and any other sources of income for 2021.
- Copy of the 2021 signed Federal Tax Return and W-2s for the student and parent (if applicable)
- Copy of the letter of termination/change in status from the employer stating the change in status date, any benefits received, and any severance pay documentation for each employment listed in the above statement.
- Copy of official statement of unemployment eligibility, if receiving unemployment benefits

Disability/Death: Name of disabled or deceased person: _____

Relationship to Student _____

- Please write a statement explaining the circumstances
- Copy of the letter from the employer stating any benefits received.
- Copy of the 2021 signed completed Federal Tax Return and W-2s (if applicable)
- In the case of disability: copy of the official statement of disability benefits, eligibility for workers compensation, or eligibility for social security benefits.
- In the case of death: copy of the death certificate or obituary.

Divorce/Separation: Date of separation or divorce:

Relationship to Student _____

- Please write a statement explaining the situation including the date of separation as well as the beginning and end date.
- Copy of the 2021 signed completed Federal Tax Return and W-2s for the student and parent (if applicable)
- In the case of divorce: copy of official divorce decree.
- In the case of separation, proof of separate addresses, (i.e. Gas/electric bill), and please address custody, child support, and alimony in a written statement

Other _____

- All students including international students, please write a statement in a separate letter explaining in detail of any financial circumstances that are not listed above.

Student Signature: _____ Date: _____

Parent Signature: _____ Date: _____

(Parent Signature required for all Dependent Students)

❖ Please send completed form and any supplemental materials (if applicable) to faappeal@cooper.edu.