

Bethany College
Appeal/Review of Financial Aid Application
or Award



Lindsborg, Kansas

Name _____ Date of Birth _____
Address _____ Social Security No. _____
City/State/Zip _____ Telephone No. _____

In most situations, federal aid eligibility formulas produce a reasonable estimate of a family's ability to contribute to a student's educational expenses. Unusual circumstances beyond the family's control or choice, however, may impact a family's financial strength in ways that are not accurately reflected through the federal need-analysis process. In such cases, federal law permits colleges to exercise professional judgment and make adjustments where appropriate.

We can analyze your situation and adjust your aid more quickly if you submit clear explanations and reasonable documentation. Please include the following. Attach additional pages if necessary.

1. Briefly explain the situation(s).
2. Give the actual cash cost of the situation(s).
3. Give the month and year this expense began and the month and year you expect it to end.
4. Provide a signed copy of your federal income tax return for the year in question.
5. If a parent's current income will be significantly lower than the reported income, give an accurate estimate of earnings for the current year.
6. If a student's income will be significantly lower, give an accurate estimate of earnings for current year.
7. Please provide information describing the basis for this request.

Upon request, I/we will provide additional documentation to substantiate the information provided:

Student _____ Date _____

Spouse _____ Date _____

Parent _____ Date _____

Send to: Bethany College
421 North First Street
Lindsborg, Kansas 67456-1897