



2026-2027

Special Circumstance Appeal Form

Student Name _____ MSU Net ID _____ 9 _____ MSU ID (9 digit) _____

If you/your family have experienced significant changes to your financial situation affecting your ability to pay your 2627 educational expenses, submit this completed form to our office, with the **required** documentation specified below.

Appeal adjustments are limited to one per academic year and will not be considered for parents refusing to contribute to your education. **It is your responsibility** to check your appeal status (your myState requirements) and to check your MSU email address for emails from us. **If your SAI is currently between -1500 and 0, an appeal won't change anything.**

SECTION A – ALL Section A documents are REQUIRED:

1. 2627 Special Circumstance Form.
2. Signed letter explaining appeal reason, including dates circumstance occurred; include company name if job loss.
3. 2627 Family Size Verification Form.

SECTION B – Appeal Reason – check ONE appeal reason and provide documentation per reason:

- ☐ **Income Loss/Reduction due to Job Loss/Change** – minimum 25% reduction and 8 weeks after loss occurred
- Letter of Termination on company letterhead
 - Unemployment Benefit Statement
 - 2024 and 2025 **Signed** copy of Federal 1040 Tax Return or Tax Return Transcript
 - 2024 and 2025 Schedules filed with Federal 1040 Tax Return
 - 2024 and 2025 W-2 Forms or IRS Wage & Income Transcript
- ☐ **Other Loss of Income** (alimony, child support, worker's compensation, retirement/pension, etc.)
- Documentation of payments received (must display total amount received and date payment stopped)
 - 2024 and 2025 **Signed** copy of Federal 1040 Tax Return or Tax Return Transcript
 - 2024 and 2025 Schedules filed with Federal 1040 Tax Return
- ☐ **Divorce AFTER FAFSA was filed**
- Copy of divorce decree (must show names, date, and signatures)
 - **Separation ONLY considered with a signed letter from attorney stating separation with intent to divorce**
 - 2024 and 2025 Signed copy of Federal 1040 Tax Return or Tax Return Transcript
 - 2024 and 2025 Schedules filed with Federal 1040 Tax Return
 - 2024 and 2025 W-2 Forms or IRS Wage & Income Transcript
- ☐ **Medical/Dental Expenses not Covered by Insurance** (already incurred)
- 2024 and 2025 Schedule A from Federal 1040 Tax Return
 - Expenses must exceed 11% of the Adjusted Gross Income (11% is already included in FAFSA calculations)
- ☐ **Death of Spouse since 2024**
- Copy of Death Certificate or full obituary
 - 2024 and 2025 **Signed** copy of Federal 1040 Tax Return or Tax Return Transcript
 - 2024 and 2025 W-2 Forms or IRS Wage & Income Transcript

SECTION C: Certification Statement – Handwritten Signatures REQUIRED. No Electronic signatures or initials.

Each person signing below certifies that all of the information reported is complete and accurate. Student and parent reported on the FAFSA must sign and date below. **Warning: Purposely giving false or misleading information may result in a fine, imprisonment, or both.**

Student Signature _____ Date _____

Parent Signature _____ Date _____

Student's Spouse Signature _____ Date _____