



Office of Financial Aid and Scholarships ▪ Indiana University South Bend ▪ P.O. Box 7111 ▪ South Bend, IN 46634-7111  
Phone: (574) 520-4357 Fax: (574) 520-5561 Email: sbfinaid@iu.edu Website: financialaid.iusb.edu  
Securely upload required documents/forms: go.iu.edu/FAsecure

**Instructions:**

If you have special circumstances due to a change in your household income, federal regulations allow the re-evaluation of your financial aid eligibility. Some of the most common reasons for this change in income are listed on page 2 of this form. Prior to submitting this form, please note the following:

- You must file the Free Application for Federal Student Aid (FAFSA) for the 2026-2027 academic year.
- If your FAFSA application has been selected for verification, that verification must be completed before review of this UCF will begin.
- Request should be submitted no later than 30 days before the end of the award period.
- Completing this form does not guarantee an increase in aid.
- If you have previously filed a UCF, you may not file an additional appeal based on the same reason unless instructed to do so by this office.

Appeals received without all proper documentation will be denied and those that contain illegible information will be returned. Processing time varies based on the time of year and may take up to three weeks.

PLEASE PRINT ALL INFORMATION

Student Name \_\_\_\_\_ Student ID Number \_\_\_\_\_

If your Student Aid Index (SAI) is 0 or less, you are currently receiving the maximum amount of aid and we are unable to make any further adjustments.

**Section I: Required Documentation:** Below are examples of special circumstances. Please check and document all circumstances that apply and provide the required materials indicated. If you have a circumstance not addressed below, call (574)520-4357 to schedule a meeting with a financial aid counselor.

**\*\*\*If Unusual Circumstance occurred in 2026 attach documentation for 2026.\*\*\***

Check Here	Circumstance	Required Documentation (PROVIDE EVERYTHING LISTED)
	<p>Loss of employment: Employment must have been for at least 35 hours per week for at least 30 weeks <b>and</b> unemployment period must have lasted at least five weeks <b>(generally must be parent if dependent student)</b>. Voluntary job loss must be due to academic program requirements or circumstances beyond the employee's control.</p>	<ol style="list-style-type: none"> <li>1) In a <b>typed</b> statement, provide a detailed explanation of job loss.</li> <li>2) Provide a letter on company letterhead, with beginning and ending dates of employment, earnings, and any compensation received in 2025.</li> <li>3) Provide a copy of the relevant party's 2025 federal tax transcript and W-2s.</li> <li>4) If unemployment compensation was received in 2025, provide a copy of benefit statement. If no benefits received, explain.</li> <li>5) If 2026-provide unemployment benefit statement and final year to date pay stub(s).</li> </ol>
	<p>Decrease in wage or salary <b>(generally must be parent, if dependent student)</b>: Voluntary loss must be due to academic program requirements or circumstances beyond the employee's control.</p>	<ol style="list-style-type: none"> <li>1) In a <b>typed</b> statement, provide a detailed explanation of wage decrease.</li> <li>2) Provide a copy of the relevant party's 2025 federal tax transcript and W-2s.</li> <li>3) If 2026-provide any year to date pay stub(s) and explanation.</li> </ol>
	<p>Divorce or separation</p> <p>*Independent students should submit a copy of their 2025 taxes and W-2's</p>	<ol style="list-style-type: none"> <li>1) In a <b>typed</b> statement, describe current living arrangements for family members, including all children.</li> <li>2) Provide a signed copy of divorce/separation decree or letter from an attorney or court.</li> <li>3) Provide documentation indicating information regarding support the "custodial" parent/student will receive, including child support/alimony payments.</li> <li>4) Submit the custodial parents' 2025 tax transcript and W-2s.*</li> </ol>
	<p>Death of spouse or parent</p>	<ol style="list-style-type: none"> <li>1) Provide a copy of death certificate.</li> <li>2) Provide documentation of any insurance settlement, pension payments, IRAs, etc. if applicable.</li> <li>3) Submit 2025 tax transcript and W-2s for survivor (student or parent).</li> </ol>
	<p>Loss of unemployment benefits</p>	<ol style="list-style-type: none"> <li>1) Provide a copy of benefit statement showing amounts received in 2025.</li> <li>2) Provide a copy of End of Benefit Notification.</li> </ol>
	<p>Rollover or emergency withdrawal (401K, IRA)</p>	<ol style="list-style-type: none"> <li>1) Provide documentation for the original amount of the withdrawal.</li> <li>2) Attach documentation of the rollover if applicable.</li> <li>3) For emergency withdrawal provide a statement explaining how the funds were used and any applicable verification.</li> </ol>
	<p>Medical expenses: Allowable expenses may include after tax insurance premiums and co-payments not covered by insurance or HSA accounts.</p>	<ol style="list-style-type: none"> <li>1) Provide a copy of the relevant party's 2024 and 2025 federal tax transcript and W-2s.</li> <li>2) If HSA funds were used, provide the relevant party's 2024 and 2025 HSA tax document.</li> </ol> <p><b>Additional documentation if a Schedule A was not filed:</b></p> <ol style="list-style-type: none"> <li>1) <b>Do not provide individual receipts.</b> Provide a statement from all medical providers stating the amounts <b>paid by the individual</b> in 2024 and 2025 (excluding insurance and HSA payments).</li> </ol>

**Section II:** Report your total projected income, adjustments, and assets from all sources for January 1 through December 31, 2026. **You must complete every box in the appropriate column(s). If it does not apply, please enter "0" or none. Incomplete forms will be returned.**

**\*\*\*If Unusual Circumstance occurred in 2026 attach documentation for 2026.\*\*\***

Independent		Income & Benefits for 2025	Dependent	
Self	Spouse		Parent 1	Parent 2
		Wages (W-2 or year to date pay stub(s)) If applicable, letter from employer with expected earnings from work for 2026		
		Unemployment benefits (attach benefit statement)		
		Interest/dividend income		
		Tax-deferred payments to IRS, KEOGH, etc.		
		Child support received for all children		
		Alimony		
		Severance pay, if applicable, attach documentation		
		Pensions and/or annuities		
		Business/farm income		
		Rental income		
		Housing allowance (military or clergy)		
		Other—List source here:		

Independent		Income Adjustments for 2026	Dependent	
Self	Spouse		Parent 1	Parent 2
		Child support paid		
		Other—List source here:		

Independent		Current Household Assets	Dependent	
Self	Spouse		Parent 1	Parent 2
		Cash, savings, checking accounts		
		Real estate (Do not include primary home)		
		Other—List source here:		

**Section IV-Certification:** I certify that the information provided on this form is complete and accurate to the best of my knowledge. Additional information may be requested and must be received before the appeal is reviewed.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent/Spouse Signature

\_\_\_\_\_  
Date

[https://indiana.sharepoint.com/sites/msteams\\_01e673-FAO/Shared Documents/FAO/forms/26 - 27 Forms/UCF/ucf application 26 - 27.docx](https://indiana.sharepoint.com/sites/msteams_01e673-FAO/Shared Documents/FAO/forms/26 - 27 Forms/UCF/ucf application 26 - 27.docx)