

Financial Aid Appeal Letter

[Your Name]

[Your Address]

[City, State, Zip Code]

[Email Address]

[Phone Number]

[Date]

[Financial Aid Office]

[University/College Name]

[Office Address]

[City, State, Zip Code]

Dear Financial Aid Officer,

I am writing to appeal my financial aid award for the academic year [Year]. I greatly appreciate the support provided, but due to unexpected financial changes in my family's situation, I am requesting a review of my eligibility for additional aid.

Currently, I am a [Your Year in School, e.g., sophomore] majoring in [Your Major] at [University/College Name]. As a dependent student, my financial situation has recently changed due to [briefly explain the situation, e.g., loss of income, medical expenses, etc.]. This change has placed an additional financial burden on my family, making it increasingly difficult to manage tuition and other costs.

My family is now responsible for [explain specifics about financial difficulties or responsibilities]. I am committed to my education and am actively seeking opportunities to support myself, but these efforts alone will not cover the full cost of my education.

Attached are documents that support my request, including [list any attached documents such as income statements, medical bills, etc.]. I kindly ask for your consideration in reviewing my circumstances and hope to be considered for additional financial assistance.

Thank you for your attention to this matter. I appreciate any assistance you can provide and look forward to your response.

Sincerely,

[Your Name]

[Your Student ID]