For DOMESTIC (U.S. Citizen) EARLY DECISION APPLICANTS ONLY: Please note that we will need a completed 2024-25 FAFSA in order to proceed with your request for reevaluation of your financial aid award. The 2024-25 FAFSA application will be available December 31, 2023. We will not be able to review any reevaluation requests before the end of February 2024 as we await the FAFSA data from the Department of Education.

Sections A and E of this form must be filled out in order to be considered a completed request.

We will respond to your reevaluation request within 4-6 weeks. (See above for Early Decision time frame)

Reevaluation of Financial Assistance

Penn’s Undergraduate financial assistance program includes both traditional financial aid and Penn Payment Options. Penn Payment Options offer flexible payment and budget options to assist you with your family contribution. Families should consider both types of assistance in assessing their capacity to meet Penn’s costs.

We want to be as responsive as possible to particular families’ situations, within the limits of federal and University policies and available funding levels. We can consider requests for reevaluation of the expected family contribution when:

- A family has experienced a significant change in financial circumstances, such as unemployment and/or loss of income.
- A family has extenuating circumstances, which were not initially known or considered in the determination of your expected family contribution, such as out-of-pocket medical expenses or expenses stemming from a natural disaster.

Below are the most common reasons for reevaluation. Please choose the reason for this reevaluation request:

- Unemployment (complete section D)
- Divorce/separation (complete section F)
- Natural disaster
- Death of parent (complete section G)
- Out-of-pocket medical expenses
- Other financial circumstances (specify in Section C)
- Application Error (on CSS Profile or FAFSA)

A. Parent’s Contribution (Required)*

Based on the financial information submitted on this application, please indicate the amount you expect to be able to contribute to your child’s education for the 2024-2025 academic year. Consider this contribution to be derived from your current income, assets, and/or through Penn Payment Plan financing (https://srfs.upenn.edu/billing-payment/penn-payment-plan)

$ __________________________  Parent’s Signature __________________________
B. Special Circumstance Expenses

If applicable, please complete any of the items in this section. For any of the items detailed below, please provide supporting documentation to show these changes:

**Parent (ONLY) Educational Debt**

<table>
<thead>
<tr>
<th>Debt &amp; Reason Incurred</th>
<th>Date Incurred</th>
<th>Original Amount</th>
<th>Current Balance</th>
<th>Monthly Payment</th>
<th>Remaining Term</th>
<th>Creditor</th>
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**Medical Expenses**

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**Other Expenses**

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**Total Expenses**

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C. Additional Comments:

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D. Unemployment Information

Employment Status:
1. Who was/is unemployed? □ Parent 1 □ Parent 2 □ Step-Parent 1 □ Step-Parent 2
2. Date of unemployment:_______________________________
3. Date that reduced salary became effective:_________________________
4. What were your 2023 gross earnings prior to your unemployment? $________________
5. a. Current employment status: □ employed □ unemployed
   b. If presently employed, date of reemployment______________________________
      and gross weekly salary: $________________
6. a. Is your spouse currently working? □ yes □ no
   b. If yes, what is your spouse’s gross weekly salary? $________________

Severance Income:
1. What amount of separation pay did you receive? $________________
2. What dollar amount of accrued vacation and sick leave did you receive in addition to separation pay? $________________
3. Have you received, or will you receive, unemployment compensation?
   □ No - Explain why:
   □ Yes - For how many weeks in 2023? ________ in 2024? ________
      What is the weekly amount? $________________
4. List the weekly amount of other benefits received or to be received
   (Workmen’s Compensation, etc.) $________________

E. Projected Income Worksheet 2024 (Required)*

This worksheet will help you project your estimated family income for 2024. It is designed for families who expect a significant reduction in income from 2023 due to unemployment, changes in employment, illness, retirement, or sabbaticals. Include with this worksheet any pertinent documentation.

List 2023 (tax year) and estimated 2024 income amounts for the following:

<table>
<thead>
<tr>
<th>Description</th>
<th>2023 Income</th>
<th>Estimated 2024 Income</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Total wages, salaries and tips (gross income) - Parent/Step-Parent 1</td>
<td>$ __________</td>
<td>$ __________</td>
</tr>
<tr>
<td>2. Total wages, salaries and tips (gross income) - Parent/Step-Parent 2</td>
<td>$ __________</td>
<td>$ __________</td>
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<tr>
<td>3. Interest income</td>
<td>$ __________</td>
<td>$ __________</td>
</tr>
<tr>
<td>4. Dividend income</td>
<td>$ __________</td>
<td>$ __________</td>
</tr>
<tr>
<td>5. Unemployment compensation</td>
<td>$ __________</td>
<td>$ __________</td>
</tr>
<tr>
<td>6. Net income from self-employment, farms, rents, partnerships, etc.</td>
<td>$ __________</td>
<td>$ __________</td>
</tr>
<tr>
<td>7. Other taxable income such as pensions, alimony, capital gains/losses, etc.</td>
<td>$ __________</td>
<td>$ __________</td>
</tr>
<tr>
<td>8. Social security benefits (include amounts received for dependent children, not including student)</td>
<td>$ __________</td>
<td>$ __________</td>
</tr>
<tr>
<td>9. Child support received</td>
<td>$ __________</td>
<td>$ __________</td>
</tr>
<tr>
<td>10. Other non-taxable income (such as disability, untaxed portion of pensions, IRA, 401(k) or 403(b) voluntary annuity contributions, VA benefits, welfare benefits, etc.)</td>
<td>$ __________</td>
<td>$ __________</td>
</tr>
<tr>
<td>11. Workmen’s Compensation or other supplemental unemployment benefits</td>
<td>$ __________</td>
<td>$ __________</td>
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</tbody>
</table>

Total Income $ __________ $ __________
F. Recent Divorce or Separation

If you complete this section, please also provide any/all relevant supporting documentation (i.e. divorce decree).

1. Date of separation: ______________________________________
   Date of Divorce: ________________________________________

2. Briefly describe the change in the household situation:
   ____________________________________________________________________________________________________
   ____________________________________________________________________________________________________

3. Which parent is the custodial parent? ________________________

4. How many people reside in the custodial parent’s household?
   (including student and the parent) __________________________

5. Name, address, and telephone number of non-custodial parent:
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

6. Occupation of non-custodial parent: ________________________

7. Property Settlement:
   a. What is the custodial parent’s share of the house, other properties, and assets?
      ___________________________________________________________________________________________________
      ___________________________________________________________________________________________________
   b. What is the non-custodial parent’s share of the house, other properties, and assets?
      ___________________________________________________________________________________________________
      ___________________________________________________________________________________________________
G. Death of a Parent/Guardian

If you complete this section, Student Financial Aid requests that you submit a copy of a death certificate in compliance with the Department of Education.

1. Name of surviving parent: (if applicable): ____________________________________________________________

2. Complete the following using estimates when a firm amount has not yet been established. Report benefits of surviving spouse and all dependents.

   **Family Income Benefits**                      **Expenses**
   Total life insurance benefits   $ ____________   Funeral   $ ____________
   Monthly Social Security          ____________   Medical   ____________
                                 (Not reimbursed by insurance)            
   Monthly Veterans Adm. benefits   ____________   Legal Fees ____________
   Monthly Pension                 ____________   Other (Please specify)  ____________

3. Will the mortgage be paid off with mortgage or life insurance?  ☐ Yes ☐ No

4. Has there been any change in the family’s assets since your financial aid application was filed? If so, please specify, including dollar amounts:

   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________
   __________________________________________________________

5. Is the estate in probate?  ☐ Yes ☐ No

Student Signature  ___________________________________________________________  Date  ____________