BENNINGTON COLLEGE

Need-Based Financial Aid Appeal Form

Please complete this form if you wish to request a review of your financial aid eligibility. You must have completed your financial aid application for the award year in order to appeal your award. Submitting an appeal does not guarantee an adjustment to your financial aid package. Eligible students for need-based financial aid appeals must have demonstrated financial need, exhausted all self-help aid (loans and work), and not be on academic warning or concern.

ST	UDENT INFORMATION		
	Incoming Student	Term beginning:	
		1	MM/YY
NAM	1E		TODAY'S DATE
ADD	PRESS		
—— PHC	DNE		
РΑ	RENTAL INFORMATION		
NAM			Custodial Noncustodial
EMA	AIL		
MAN			Custodial Noncustodial
EMA	AIL		_
ΑP	PEAL INFORMATION		
this by S acco disal	ald your financial need remain about the same, you can level of funding for four years at the time the student IGNIFICANT changes in a family situation, though unt for family changes. These changes may include lobility, layoff, change in child or spousal support, increase number of family members in the household since years.	enrolls. Cause for review of your fathere is no guarantee that addition less of income or resources due to deased or excessive medical costs no	financial aid eligibility may be brought on nal aid will be provided by the College to leath, divorce, unemployment, retirement, tot covered by health insurance, or a chang
Indi	cate which of the following best describes your si	ituation and attach or provide a	detailed explanation on the next page:
	Change or loss of anticipated resources.		
	Change or loss of income or employment.		
	Increased family medical expenses not covered by in	nsurance.	
	Change in family size, marital status, or number in o	· ·	
	COVID-19 related	Other:	

Any changes to current financial aid awards will be contingent upon the type of funds available, the College's appeals budget, student eligibility guidelines and funding regulations. The Appeals Committee may require further documentation before making a decision.

APPEAL EXPLANATION Please provide a detailed statement below regarding the significant changes in your financial circumstances or describe any special conditions that may not have been considered at the time your award was calculated. Be very specific about the amount of additional funds you are requesting. Additional funds requested (maximum \$5,000): College loan debt: Student borrowed to date \$ _ Parent loans for this student \$ __ Upload this completed form securely on your My Financial Aid page or mail, email or fax to the Financial Aid Office. We will contact you if further documentation or information is necessary. If you are a dependent student, one parent must also sign below.