# 2024-2025 Late FAFSA/DREAM Act Application Appeal

Name: Last	First	UID#	
☐ Check this box if you will be enrolled at UCLA for Summer 2024			
considered for insti	neir Financial Aid Application tutional aid. If your Student ange your eligibility for insti	past the May 2nd priority filing deadline are not automatically Aid Index exceeds your cost of attendance, submitting this tutional aid.	

# INSTRUCTIONS

On the 2nd page of this appeal, please provide a legible and complete statement indicating all of the extenuating circumstances that caused you to miss the priority filing deadline. Remember that the FAFSA and DREAM Act Applications were available for submission as of January 1st and the priority filing deadline was extended until May 2nd for the 24/25 academic year. Your explanation must demonstrate your inability to complete the application within the above mentioned time frame.

\*\*All appeals must be accompanied with supporting documentation

For example: A professional statement on letterhead. (Doctor's Note, etc.)

\*\*Late appeal statements MUST be written by the student. Statements written by parents or relatives will not be accepted or considered.

Examples of extenuating circumstances we may consider include:

- Hospitalization
- Natural Disaster
- Applications submitted with incorrect personal information
- Other extenuating circumstances rendering you incapable of applying by the priority filing deadline.

# **REVIEW PROCESS**

If your appeal is approved OR denied, you will be notified electronically via your Financial Aid Notification. Appeal approvals **are a one-time exception.** All students are required to apply by the March 2nd priority filing deadline each year in order to be considered for institutional aid.

Second or Third consecutive year appeals are generally not approved unless the circumstances and documentation are different than the reasons provided in a previous year.

Appeal review time is 2 -3 weeks from the date of submission.

### **HOW TO SUBMIT**

### **ONLINE**

Log on to MyUCLA> click Finances and Jobs tab> under Financial Aid and Scholarships click> View All Documents. Attach form as necessary

#### FAX

Fax: 310-267-4143 Attn: UCLA Financial Aid and Scholarships

Provide a <b>complete</b> explanation of the extenuating circumstance below OR attach a separate page.		
CERTIFICATION STATEMENT: I certify t knowledge. I have also attached all required doc a cancellation of my aid and prevent me from re (University grants, Work-Study, and Perkins Lottee receipt of those awards if in the event funding	that all information reported on this form is true and accurate to the best of my cumentation, if necessary. I understand that purposely falsifying information may lead to ceiving financial aid in future academic years. I understand that certain awards can) are subject to availability of funds and review/approval of this form does not guarantee that the purpose of the purpose of the property of the purpose o	
Student Signature	Date	