2018-2019 Late Financial Aid Application Appeal Form
FAFSA and/or DREAM Act Application

Name: Last
First
UID#

☐ Please check this box if you will be enrolled at UCLA for Summer 2018.

Students who do not file their financial aid application by the March 2nd priority filing deadline are not considered for institutional aid.

Please note that if your Expected Family Contribution exceeds the cost of attendance on time appeal will not change your eligibility.

Please use the space provided on page 2 to provide an explanation of any extenuating circumstances that caused you to miss the priority filing deadline. Please keep in mind that the FAFSA and DREAM Act Applications are available in October and UCLA’s priority filing deadline is March 2nd every year. Your explanation must demonstrate your inability to complete the application within the above mentioned time frame (October 2017 through March 2nd, 2018).

**All appeals must be accompanied by documentation supporting your explanation.**
For example: A professional statement on letterhead. (Doctor's Note, etc.)

**Late Application Appeal statements MUST be written by the Student. Statements written by parents or relatives will not be accepted.**

Examples of extenuating circumstances we may consider include:

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

Please note that if your application is approved, it will be 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.

Late Application Appeals for a 2nd or 3d consecutive year are generally not approved unless the circumstances and documentation are different than the reasons provided in a previous year.

Please allow 2 to 3 weeks for a decision. Appeal decisions will be provided to students via myUCLA.
Please write your explanation of extenuating circumstances on the fields below or attach a separate page.

CERTIFICATION STATEMENT: I certify that all information reported on this form is true and accurate to the best of my knowledge. I have also attached all required documentation, if necessary. I understand that purposely falsifying information may lead to a cancellation of my aid and prevent me from receiving financial aid in future academic years. I understand that certain awards (University grants, Work-Study, and Perkins Loan) are subject to availability of funds and review/approval of this form does not guarantee receipt of those awards if in the event funding has been exhausted.

_______________________________________________
Student Signature*

___________________________________
Date

*Electronic signatures are not acceptable