



2024-2025 MIDYEAR FINANCIAL AID APPEAL FORM

This form is for families who have had a **significant change** in circumstances since the original financial aid application was filed. *Note: if you previously received additional funds for the current academic year through the appeal process, you may not qualify for additional funds.* Please provide all requested information and any supporting documentation. Please note that grant funding is limited and we expect students to take advantage of all funding available to them, including federal loans, before we can typically offer additional grant assistance. If you have any questions, please contact Student Financial Services at (781) 239-4219 or sfs@babson.edu.

PART I: Parent/Student Information

Student's name: _____

Parent 1 name: _____

Parent 2 name (if applicable): _____

Parent(s) E-mail address: _____ Parent(s) daytime phone number: _____

PART II: Changes in Household Income and Employment

Please indicate below the circumstances that best describe the reason for your appeal:

1. Change in Employment

If a parent is currently unemployed or experienced a change in employment impacting household income, please indicate below:

Parent name: _____

Employer: _____ Effective Date: _____

2. Change in Income

If a parent experienced a change in income, please indicate reason(s) below:

- ☐ Unemployment/Job change
- ☐ COVID-19 related
- ☐ Issues related to self-employment
- ☐ Reduced overtime/commission
- ☐ Health issues or medical expenses
- ☐ Retirement
- ☐ Termination by employer
- ☐ Other (please specify) _____

3. Loss of other income (unemployment benefits, social security, child support, etc.)

Type of income and amount: _____

PART III: 2023 Federal Tax returns and estimated 2024 Income

Since your 2024-2025 financial aid package was based on 2022 information:

1. Please upload to [IDOC](#) copies of parent and student completed 2023 federal tax returns and any W-2 forms.
2. In addition, please provide parent and student estimated **2024** information below:

2024 Estimated Taxable Income	Parent 1	Parent 2 (if applicable)
Wages, salaries, tips		
Interest/Dividend income		
Net income/loss from business		
Rental income/loss		
Capital Gain/loss		
Severance income		
Unemployment compensation		
TOTAL TAXABLE INCOME		
2024 Estimated Untaxed Income	Parent 1	Parent 2 (if applicable)
Contributions to retirement plans (401k, 403b, SEP, IRA)		
Pension/IRA distributions		
Social Security benefits		
Worker's Compensation/Disability benefits		
Child support		
Housing Allowance		
Cash/gifts paid on your behalf		
Other untaxed income (list type in comments)		
TOTAL UNTAXED INCOME		

2024 Estimated Taxable Income	Student
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Wages, salaries, tips	
TOTAL TAXABLE INCOME	

PART IV: Explanation of Circumstances

REQUIRED: Please summarize below how the changes listed on this form that have impacted your family’s finances:

PART IV: Submission

Amount of additional aid you are requesting for **Spring 2025**: _____

Once the form is complete, please email to sfs@babson.edu. By submitting this request to SFS, you and your parent acknowledge that the information provided is accurate to the best of your knowledge as of today’s date. We will respond to your request within 2 weeks of receipt.

Date: _____

