



THE PEABODY INSTITUTE  
OF THE JOHNS HOPKINS UNIVERSITY

Financial Aid Office  
1 E. Mt Vernon Place  
Baltimore, MD 21202  
410-659-8100 x 3023 / FAX 410-659-8102  
E-mail: [finaid@peabody.jhu.edu](mailto:finaid@peabody.jhu.edu)  
Website: <http://www.peabody.jhu.edu/finaid>

**2009-2010**

## **Appeals for new or increased assistance**

In some cases, families experience unusual circumstances. Such situations include loss of income, death of a wage earner or unexpected medical expenses not covered by insurance. These types of events may warrant a review of the financial package. Peabody makes every effort to provide assistance to students who qualify; however, due to limited resources, it is not possible to provide assistance to every eligible student.

If you wish to appeal your award based on any of these or similar circumstances, you must:

1. Apply for financial aid using the FAFSA (<http://www.fafsa.ed.gov>) or International Student Application for Financial Aid and Scholarship (<http://www.peabody.jhu.edu/43>). No appeal will be considered unless one of the above forms is received.
2. Submit a written appeal, including an explanation of your circumstances and the amount of additional or new assistance that you need.
3. Submit the Change in Financial Circumstances Worksheet (page 2 of this document), along with supporting documents including most recent federal tax returns, recent pay stubs, benefit statements, job termination letter, etc.
4. Documents can be mailed, faxed or e-mailed to the address above.

**Prospective Students:** Appeals must be received on or before Friday, April 17, 2009 (April 7<sup>th</sup> for graduate students). Applicants will be notified of the appeal committee's decision by e-mail on or before Friday, April 24, 2009 (April 10<sup>th</sup> for graduate students).

**Returning Students:** Appeal decisions will be communicated to students over the summer months, typically before the end of July.

## 2009-2010 CHANGE IN FINANCIAL CIRCUMSTANCES WORKSHEET

<b>STUDENT'S NAME:</b>	
<b>STUDENT'S E-MAIL ADDRESS / PHONE#:</b>	
<b>PLANNED DEGREE (circle one):</b>	BM    PC    MA    MM    DMA    AD    GPD
<b>MAJOR:</b>	
<b>MAJOR TEACHER:</b>	

**\*\*PARENT INFORMATION is REQUIRED for all UNDERGRADUATE students born BEFORE January 1, 1986\*\***

EXPECTED 2008 INCOME	STUDENT	SPOUSE	FATHER / STEPFATHER	MOTHER / STEPMOTHER
Gross Income EARNED FROM WORK: 1/1/2009 through Present Date	\$	\$	\$	\$
Gross Income to be EARNED FROM WORK: Present Date through 12/31/2009	\$	\$	\$	\$
Lump Sum Termination Benefits	\$	\$	\$	\$
Unemployment Benefits	\$	\$	\$	\$
Workmans Comp Benefits	\$	\$	\$	\$
Other Income (specify source below)*:				
-->Source:	\$	\$	\$	\$
-->Source:	\$	\$	\$	\$
<b>Total Expected 2009 Income</b>	\$	\$	\$	\$
<b>Total ESTIMATED 2010 Income</b>	\$	\$	\$	\$

Based on your current financial situation, indicate the amount your family can contribute towards your educational expenses for the 2009-2010 academic year:  
 \$ \_\_\_\_\_ (MUST BE COMPLETED)

\*Other Income includes interest and dividends, pension distributions, business and rental income, alimony and child support, social security, insurance benefits, severance benefits, early withdrawal from retirement funds, clergy or military housing allowances.

DEBT ITEMIZATION				
Reason / Source of Debt	STUDENT	SPOUSE	FATHER / STEPFATHER	MOTHER / STEPMOTHER
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$
	\$	\$	\$	\$

I certify that all of the information on this form is true and complete to the best of my knowledge. I agree to notify the Financial Aid Office of any additional changes to the expected 2009 income.

STUDENT'S SIGNATURE: _____	DATE: _____
SPOUSE'S SIGNATURE: _____	DATE: _____
PARENT'S SIGNATURE (if applicable): _____	DATE: _____

**\*\*PLEASE ATTACH supporting documentation, such as most recent income tax / earnings statements, pay check stubs, benefit statements, job termination letter, etc.**