Appeal for Special Circumstances
Expenses Due to Natural Disaster or Major Catastrophe

PID__________________________ Last Name _____________________________ First Name____________________

If you have expenses due to a natural disaster or major catastrophe not covered by insurance, you may request an appeal for special circumstances by providing the information below.

1. Please provide a description of the situation and documentation to substantiate the claim (e.g., a copy of the FEMA disaster assistance form, insurance appraisal, etc.).

2. If not already provided to our office a copy of your 2018 Federal Tax Transcript.

3. For the 12-month period January - December 201__, indicate the: (Jan-Dec amounts)

   Amount of expenses attributed to natural disaster or major catastrophe. $_____________

   Amount of insurance reimbursements received or expect to receive. $_____________

   Amount of federal/state assistance received or expect to receive. $_____________


EXPLANATION OF SPECIAL CIRCUMSTANCES:

__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________
__________________________________________________________________________

Parent’s Name (Print): ______________________________________________________

Parent’s Signature:________________________________________________________ Date: ______________________

RETURN THIS FORM WITH ALL REQUIRED DOCUMENTS TO:
UC San Diego Financial Aid and Scholarships, 9500 Gilman Drive, La Jolla, CA 92093-0013 or FAX 858-534-5459

For Office Use: [ ] Approved amount of Expenses $_______________
FAO Signature: ______________________________________________________ Date: ______________________