

Student Aid Index (SAI) Adjustment

Request for Review of FAFSA Financials (SAI)

IMPORTANT: You must file a 2026-2027 Free Application for Federal Student Aid (FAFSA) and receive a College Financing Plan before submitting this form.

Complete this form if you have extenuating circumstances which have resulted in a reduction in resources or a decrease in disposable income for calendar year 2025 or 2026 which will impact your family's ability to contribute toward your educational expenses. Submit your application (pages 2 and 3) with the specific documentation listed for your circumstance on page 4 and 5.

The university will only consider reductions in income for the circumstances listed in Sections A, B or C on the application. The following circumstances will not be considered for a reduction in income:

- Multiple children in college
- Tuition paid for elementary/secondary private school
- Unusual expenses related to personal living (e.g. bills for repairs, wedding expenses, credit card bills, home mortgage or school loan payments, car payments, legal expenses, other miscellaneous consumer item expenses)
- Reductions in income resulting from bankruptcy proceedings
- Foreclosure of your primary home
- Pension/IRA distributions (non-rollover)
- Medical expenses incurred but not paid

If the reason you are requesting a review is listed above, do not complete this form.

If you have questions regarding this process after reading through this document please contact the One Stop Office via email at verification@rider.edu.

Request for Review Application

Special Circumstances

Student Name: _____ Bronc ID#: _____

Complete Mailing Address: _____

Student's phone #: _____ Student's Rider email address: _____

A. Reduction of Income:

Please check the reason(s) that best describes your current situation. Indicate who suffered the change and the date that this change occurred. *Leaving this information blank may delay the processing of your request.*

- *Loss of Employment or Wages: (Rider University policy indicates that the university does not consider a job loss until 6 months after the separation date.)*

☐ Student	☐ Spouse	☐ Parent 1	☐ Parent 2
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Last date of employment: _____	Date expected to return to work: _____
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- *Loss of Unemployment Compensation or Untaxed Income or Benefits:*

☐ Student	☐ Spouse	☐ Parent 1	☐ Parent 2
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Which type of benefits have ended: _____	Date: _____
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- Separation or Divorce of Parents or Student & Spouse:

Your parents or you and your spouse have separated or divorced since filing the tax return for the year indicated on the FAFSA and/or since the FAFSA was filed.

Date: _____

- Death or Disability of Parent(s) or Student's Spouse:

☐ <i>Spouse</i>	☐ <i>Parent 1</i>	☐ <i>Parent 2</i>
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B. Unusual Expenses:

- Unusual medical/dental expenses claimed on schedule A of the tax return for the tax year indicated on the FAFSA.

C. Rollover of IRA or Pension fund:

- A rollover of IRA or pension funds for the tax year indicated on the FAFSA.

D. Change in housing status:

- You and/or your family are now homeless.

Please provide any additional information to support your petition:

Student Signature

Date

Parent/Spouse Signature

Date

Required Documents for Request for Review

These documents should be uploaded via the [One Stop Document uploading system](#).

You must submit the home copy (not IRS Transcript) of the 2024 federal tax returns, all pages and schedules 1-3, A, B, C, D, E, F; no state return, no worksheets. Typically, the tax return is 2-10 pages.

In addition to the 2024 federal tax returns, please submit the documentation indicated below as required to support your request:

Loss of Employment or Wages:

- Statement (on company letterhead) from prior employer(s) state termination date (if applicable), AND
- Last pay stub(s) from all prior position(s), including vacation and severance pay, AND
- Most recent pay stub for current employer(s) (if applicable), AND
- Documentation of Unemployment benefits with amount or denial. Unemployed person must file.

Loss of Unemployment Compensation or Untaxed Income or Benefits:

- Statement from agency that terminated benefits indicating date of termination and total amount of benefits received for the current year

Separation of Parents or Student & Spouse:

- Copy of legal separation document, OR
- Proof of different legal residence for the party who left the household (driver's license, apartment lease, utility bill (not a cell phone bill), etc.)
- Documentation of spousal and/or child support, if applicable

Divorce of Parents or Student & Spouse:

- Divorce decree with spousal and/or child support documentation

Death of Parent(s) or Spouse:

- Death Certificate, OR
- Obituary notice, OR

- Bill from funeral home

Disability of Parent/Student/Spouse:

- Amount of benefits (short and/or long term) received since disability began, AND
- Documentation of all other income earned or received for the current year

Unusual Medical/Dental Expenses:

- Schedule A from the Federal 1040 form for 2024 as applicable, OR
- Credit card statements, receipts marked paid or statement from the medical provider listing all payments

Rollover of IRA or pension funds:

- 1099-R form AND
- 2024 federal 1040 tax return page 1

Change in housing status:

- Letter from homeless shelter you are living in