

Student's Name: _____

Student's ID: _____ p. 4 of 4

Closing Comments and Signature

We will review your request for reconsideration carefully. After taking into consideration any allowable special circumstances, if we determine that additional need exists, we will try to offer adequate additional funding to meet that need. Unfortunately, we cannot guarantee that adequate funds will be available.

Copies of signed 2019 Federal income tax returns MUST be on file from parents before any 2020 - 2021 academic year need-based Tulane Scholarship will be allowed to disburse to the student's Tulane Accounts Receivable account. It is very important that the information you provide now be as reasonable an estimate as possible to assure accuracy. If future documentation indicates a significant discrepancy from the data provided, your child's need-based aid awards for the 2020-2021 award year must be revised, and aid previously disbursed may be REVERSED.

Please sign below.

I have read and understand the instructions and the conditions of the reconsideration. In case of additional changes in the family's financial situation, I will notify the Tulane University Financial Aid Office promptly. My signature below indicates that all the information provided by me in this application is correct and honestly presented.

Student's Signature: _____ Date: _____

Spouse's Signature: _____ Date: _____

Student's Name: _____

Spouse's Name: _____

Address: _____

Student Phone Number: _____ Student E-Mail: _____

Student's Name _____ Last 4 digits of student's SSN # _____

Student Tulane ID _____

Submit this form to: Tulane University Financial Aid, 6823 St. Charles Avenue, Room 205, Building 14, New Orleans, LA 70118
Or

Upload this form to: <https://finaidforms.tulane.edu/Home/Account/Login>

Please remember to attach all appropriate documents with the student's name at the top of each document.