

**Student's Name**

Address

City, Street Zip code

Date

Financial Aid Officer's Name

Job Title

School

Address

City, Street Zip code

[Mr./Ms.] [Last name]:

Thank you for assisting with my application for financial aid for the [insert year] school year. I received the offer letter dated [insert date]. While I appreciate the financial assistance that has been awarded to me, I am contacting you to request reconsideration due to a significant change in [my or my family's – (base this on whether you considered are a dependent or independent student)] circumstances since the time the application was submitted.

Since the time I submitted my FAFSA, my ability to pay out-of-pocket for school expenses has gone down significantly and I need a larger financial aid package in order to continue my education. [Insert a detailed explanation of the reasons why you need more financial assistance than was requested. Do not be overly emotional, but paint a very clear picture of why you are experiencing increased need.]

I am committed to pursuing my education and hope that you will be able to reconsider the amount of financial aid for which I am eligible based on the changes in my situation. Doing so will enable me to continue moving forward with my goal of earning a degree from [insert name of school]. Please let me know if any additional information is required or if I should schedule a time to come and speak with you in person. You may reach me at [insert phone number] or [insert email address]. Your consideration is greatly appreciated.

Sincerely,

[Your name here]