

this fol

PARENT REEVALUATION REQUEST

| Student Name | Reed ID |
|--|--|
| | |
| | |
| Parent Name(s) | Parent Email |
| your family financial situation based on unusual, spec | sting the Reed College Financial Aid Office to reevaluate cial, or changed circumstances. The financial aid office |
| | cial, or changed circumstances. The financial aid office espond in writing with the results of this review. Submit |

DOCUMENTATION: Unless already submitted, all requests for reconsideration must be accompanied by be

Involvantafyillosonaf elupiloyadissiblijiagtilliriesteor injuryispirovide a letter from the doctor which includes the date(s)
you or your spouse were treated for the illness/injury and a brief description of how the illness/injury
interfered with the ability to work.

Involuntary reduction in earned income or reduction/elimination of child support, unemployment compensation, Social
benefits, etc. Provide documentation from the employer or agency indicating the
date of the change and the revised amount.

- Separation or divorce after the 2025-26 financial aid applications are filed: provide the date of separation/divorce. Also provide updated statement of the current number in the household supported by the parent, including the student, and the number excluding the parent, that will attend college at least half-time in 2025-26. Do not include the income or taxes to be paid info of the non-custodial parent in Part III.
- Death of a parent who completed the 2025-26 financial aid applications for the student, provide the name of the
 parent and the date of death. Also provide an updated statement of the current number of family members you
 support and the number of those who will attend college at least halftime in 2025-26.
- You may submit documentation to the Financial Aid Office's Secure Portal: filerobot.reed.edu/groups/finaid

<u>'% * ZneZXZY ^cXdb ZVcYWcZ[^ih/</u>

EVgZci°&\gdlhi