

## 2026-27 Financial Aid and Scholarship Appeal Form

The Cleveland Institute of Art offers students an opportunity to appeal for additional assistance once *all other financial aid avenues* have been exhausted. This could include:

Financing options – all federal loans accepted, PLUS loan or private loan application attempted.  
Special Circumstances for SAI adjustments, if indicated.

The Financial Aid office can counsel you on financing applications and whether or not a SAI Special Circumstance request is appropriate for you.

If your reason to appeal for additional aid is based upon another school's offer of scholarships and their financial aid is greater than the offer received by CIA, submit copies of all financial aid offer letters from other schools who provided more merit and need based financial assistance than CIA.

The committee will not review an application until all financing options have been attempted. The results of this request for additional assistance will be based on your circumstances. Students and/or parents will be notified via email or by phone once a decision by the Financial Aid and Scholarship Appeals Committee has been rendered. Please remember that submission of this form does not guarantee an adjustment to the student's financial aid.

*The Financial Aid and Scholarship Appeals Committee has the responsibility for reviewing this information and for making the decision regarding your appeal. As soon as the Committee renders a decision regarding your appeal, a staff member from the Office of Financial Aid will notify you. The Appeals Committee strives to render decisions weekly. However, circumstances may necessitate a longer timeframe. The Appeals Committee decision is final.*

**Please PRINT clearly**

Student's Full Name \_\_\_\_\_ CIA ID \_\_\_\_\_

Student E-mail Address \_\_\_\_\_

Student's Cell Phone Number \_\_\_\_\_ Home Phone \_\_\_\_\_

Permanent/Home Street Address \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

Parent 1 Name \_\_\_\_\_ Parent 1 Day Phone Number \_\_\_\_\_

Parent 1 Email Address \_\_\_\_\_

Parent 2 Name \_\_\_\_\_ Parent 2 Day Phone Number \_\_\_\_\_

Parent 2 Email Address \_\_\_\_\_



**2026 Estimated Household Income/Expenses:**

	Father/Stepfather	Mother/Stepmother	Student (Spouse)
Estimated 2026 Gross Income	\$	\$	\$

**Estimated MONTHLY 2026 expenses for family:**

Mortgage payment or rent	\$
Utilities – (electric, water, gas, internet, cable)	\$
Phone/Cell phone	\$
Auto Loan Payments	\$
Food	\$
Medical	\$
Clothing	\$
Entertainment	\$
Savings	\$
Other (please describe)	\$
<b>TOTAL MONTHLY EXPENSES</b>	<b>\$</b>

**Certification**

By signing below, we (the parent and the student) affirm that the data contained on this form are true and complete to the best of our knowledge. I further understand that submission of this information does not guarantee an increase in my financial aid package.

Student \_\_\_\_\_ Date \_\_\_\_\_

Parent \_\_\_\_\_ Date \_\_\_\_\_

Please either mail, e-mail or fax your 2026-27 Financial Aid and Scholarship Appeal Form and required documentation to:

The Cleveland Institute of Art  
 Financial Aid and Scholarship Appeals Committee  
 11610 Euclid Avenue  
 Cleveland, Ohio 44106  
 Fax: 216-754-3634  
[financialaid@cia.edu](mailto:financialaid@cia.edu)