

**FINANCIAL AID OFFICE**  
**REQUEST FOR REVIEW OF INCOME DATA**

Dependent       Independent

Fall 2020 & Spring 2021      Deadline to submit request for these semesters: February 1, 2021 Noon

Federal regulation requires all applicants to report **2018** income figures on their current Free Application for Federal Student Aid (FAFSA). However, if a student/parent can show a change in their financial situation due to special circumstances after they have received their completed Student Aid Report (SAR) with completed information, they may request a review of income data.

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**Special Circumstances**

We are able to review and possibly update information you gave on your financial aid application if special circumstances exist. Examples of special circumstances include a reduction of income because the student or parent has been laid-off, terminated, separated, divorced, or other special circumstances.

All requests will be reviewed by the Financial Aid Office, but not all requests are granted.

**Required Documentation**

In order for the Financial Aid Office to review your request, we need documentation of your special circumstances. You must complete ALL the attached forms and provide ALL required documentation listed below. Do not leave any questions blank.

- Personal Statement of Explanation (Required)
- Explanation Questionnaire (Required)
- Attach **2018** and **2019** Federal Tax Form 1040 that were submitted to the IRS with ALL schedules (If applicable). *In order for your request to be considered, you or your parents must submit 1040's or tax transcripts for both years. If your FAFSA considers you independent we only need your taxes for both years. If your FAFSA considers you dependent, only submit your parents taxes for both years. **You are not eligible to submit a review of income if both years cannot be submitted.** If you are unclear if you are dependent or independent, please ask someone in Financial Aid.*

**AND**

**You must also provide one or more of the following:**

- Unemployment or Disability Award Letter and the most recent check stub
- Proof of parent's/student's separation or divorce
- Any other documentation that supports your request for review

**Request can only be processed from July 1, 2020 to February 1, 2021**

**IF YOU DON'T PROVIDE ALL REQUIRED PAPERWORK OR PROOF,  
YOUR REQUEST WILL BE DELAYED OR DENIED!**

**SUBMIT ALL FORMS AND DOCUMENTS TO THE FINANCIAL AID OFFICE.**

Request can only be made once.

**NOT ALL REQUESTS ARE GRANTED**



**Student information ONLY if Independent**  
**(Parent information only if student is DEPENDENT)**

**FINANCIAL AID OFFICE**  
**Explanation Questionnaire**

Do not leave any questions blank.

Student's Name: \_\_\_\_\_ Student ID: \_\_\_\_\_  
*LAST FIRST MIDDLE*

Student School Email Address: \_\_\_\_\_

1. Did you voluntarily quit or reduce your hours at work? Yes  No   
Did either of your parents voluntarily quit or reduce their hours at work? Yes  No

If NO, skip to question two (2)

If YES, please explain why: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

When did you quit or reduce your hours? Month \_\_\_\_\_ Year \_\_\_\_\_

When did either of your parents quit or reduce their hours? Month \_\_\_\_\_ Year \_\_\_\_\_

If you are still working, how many hours per week do you work? \_\_\_\_\_

If the parent reduce their hours, how many hours per week do they work? \_\_\_\_\_

2. Were you laid-off or terminated from your job? Yes  No   
Were either of your parents laid-off or terminated? Yes  No

If YES, please check all that apply: Self  Mother  Father

What was the date you were laid-off or terminated? Month \_\_\_\_\_ Year \_\_\_\_\_

What was the date your parent was laid-off or terminated? Month \_\_\_\_\_ Year \_\_\_\_\_

Has this person applied for Unemployment benefits? Yes  No

3. Are your parents married or remarried? Yes  No

4. Do you or your parent have a Workman's Comp. claim? Yes  No

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CERTIFICATION I/we certify that all information reported on this form is true, complete, and accurate to the best of my knowledge. I/we agree to provide proof of the information that I/we have reported on this form. False statements or misrepresentation will be cause for denial, reduction, withdrawal, and/or repayment of the financial aid. **I, the student understand that I must immediately report changes of the above information to the Financial Aid Office.**

\_\_\_\_\_  
*Student Signature*

\_\_\_\_\_  
*Date*

\_\_\_\_\_  
*Parent Signature (if applicable)*

\_\_\_\_\_  
*Date*