

Name:

ID:

2020-21 Parent Income Appeal.online (711)

2020-21 Parent Income Appeal

To apply for an income adjustment the following must be met:

1. Have filed a 2020-21 FAFSA with a valid Expected Family Contribution (EFC).
2. If selected, the verification process must be completed before an income adjustment can be reviewed or considered.

Please note:

3. We are not able to process income adjustments based on estimated business or seasonal income. For all families with this type of income, we will do an End of Year Review and will require the 2018 federal tax return transcript.
4. Loss of overtime cannot be considered.

Check the categories that apply to the parent(s)

Unemployment: Parent(s) must have earned money in 2018, lost his/her job involuntarily.

Parent 1 Name: _____

Parent 2 Name: _____

Documentation required:

- Submit a copy of the letter of separation/termination or letter from previous employer on company letterhead stating effective date and the circumstances under which parent left their employment.

OR (if receiving unemployment)

- Submit unemployment benefits statement from state agency stating start and end dates, gross weekly amount, and total amount of benefits.

Significant decline in income from 2018 to 2020: Parent(s) must have earned money in 2018 and experienced a significant decrease in income that is the result of reduction in hours/workforce or loss of employment.

Parent 1 Name: _____

- Reason for loss of income: reduction in hours/workforce resignation/termination other

Parent 2 Name: _____

- Reason for loss of income: reduction in hours/workforce resignation/termination other

Documentation required:

- Documentation of change in employment: letter from employer clearly stating reduction of hours/workforce on company letterhead stating effective date.

if applicable,

- If reason for loss of income was "other" submit a letter explaining the situation.

Other catastrophic event in 2020 not covered by this form.

Documentation required:

- Submit a letter explaining the situation along with supporting evidence.

AND

- Submit official records, invoices, and receipts of expenses paid (not covered by insurance).

AND

- Submit a copy of the statement(s) from the insurance company of any paid or denied claims.

Parent(s) phone #: _____ Parent(s) Email: _____

*****REMINDER:** complete the **Estimated 2020 Total Income and Benefits** worksheet***

Estimated 2020 Total Income and Benefits: January 1, 2020 – December 31, 2020

Please report your entire household projected taxable and untaxed income for 2020, including business income, rental income, pension, 401K/IRA distributions, social security, disability, child support, spousal support, and all other types of income.

DO NOT LEAVE ITEMS BLANK; enter zero (0). If items are left blank, form will not be processed.

| 2020 TAXABLE INCOME FROM WAGES | Parent 1 Name: _____ | Parent 2 Name: _____ |
|---|---------------------------------|---------------------------------|
| Gross wages earned through today's date: <input type="checkbox"/> <i>Provide last or most recent pay statement showing gross year-to-date wages from all jobs worked in 2020 (both parent 1 and parent 2, if applicable)</i> | \$ | \$ |
| Estimated wages from today's date through 12/31/2020 (do not include unemployment benefits in estimated wages): | \$ | \$ |
| OTHER TAXABLE INCOME | | |
| Unemployment gross income to date and anticipated through 12/31/2020 <input type="checkbox"/> <i>Provide benefits eligibility letter from state agency stating start and end dates, gross weekly amount, and total amount of benefits.</i> | \$ | \$ |
| Severance, paid time off or vacation pay out if not included in gross wages | \$ | \$ |
| Social Security income <input type="checkbox"/> <i>Provide monthly statement</i> | \$ | \$ |
| Taxability disability income <input type="checkbox"/> <i>Provide monthly statement</i> | \$ | \$ |
| Taxable pension <input type="checkbox"/> <i>Provide monthly statement</i> | \$ | \$ |
| Interest/dividend income <input type="checkbox"/> <i>You should anticipate any type of asset income you would be required to report on your 2020 Federal Tax Return.</i> | \$ | \$ |
| Business income, rents, royalties, and/or annuities <input type="checkbox"/> <i>Self-employed/seasonal employment will require 2019 tax transcript</i> | \$ | \$ |
| Maintenance/support from ex-spouse in 2020 (in cases of separation or divorce) <input type="checkbox"/> <i>Provide court documents</i> | \$ | \$ |
| Taxable income from 401K disbursements or other existing assets: Include year to date gross disbursements and anticipated disbursements. | \$ | \$ |
| Other taxable income (survivor's benefits, lump sum payout, etc.) <input type="checkbox"/> <i>List the source:</i> | \$ | \$ |
| 2020 UNTAXED INCOME | | |
| Housing allowance for military or clergy <input type="checkbox"/> <i>Provide contract or LES Statement</i> | \$ | \$ |
| Workers Compensation <input type="checkbox"/> <i>Provide gross monthly statement</i> | \$ | \$ |
| Untaxed disability income <input type="checkbox"/> <i>Provide gross monthly statement</i> | \$ | \$ |
| Child support received for all members of your household (do not include foster care or adoption payments) | \$ | \$ |
| Untaxed pension <input type="checkbox"/> <i>Provide gross monthly statement</i> | \$ | \$ |
| Other income not reported on the tax return <input type="checkbox"/> <i>List the source:</i> | \$ | \$ |
| 2020 TOTAL INCOME FROM ALL SOURCES | \$ | \$ |

Student Signature: _____ Date: _____

Parent(s) signature: _____ Date: _____