
INCOME ADJUSTMENT REQUEST 2024-2025

Student Name: _____

Student ID #: _____

Email Address: _____

Phone Number: _____

This form is used to report changes in income that occurred since filing the 2024-2025 FAFSA. The professional judgment process is an extensive process that requires a thorough review by the financial aid staff to determine if any changes may be appropriate based on your application. **If your FAFSA is selected for verification, this process must be completed first.** If additional documentation is request, the student will be notified via email. The student will be notified via email if the request is approved or not approved.

PLEASE NOTE: Requesting to exclude gambling winnings does not qualify for an income adjustment. Graduate students are not eligible for need-based grants or need-based loans, so an Income Adjustment Request may not be necessary.

Below is a list of recommended documentation. You may include any documentation that is relevant to your claim and check the following boxes to indicate that they have been included. An Income Adjustment request without documentation will not be considered.

- Employer's notice (written documentation) of termination/cessation on company letterhead
- Last paystub from all employers showing year-to-date earnings for both parent and/or student
- Copy of certification of unemployment benefit eligibility and total amount received/to be received
- Print out of weekly unemployment compensation received in 2023 and to-date in 2024
- Documentation of all other sources of parent & students income (taxable and non-taxable)
- Employer's notice (written documentation) of reduction of income on company letterhead
- Proof of type of retirement, effective date, and monthly pension(s) amount(s) along with any other retirement account statements
- Attending doctor's signed and dated statement of disability
- Documentation of date disability or natural disaster resulted in termination of employment
- Documentation of employer disability payments
- Notification of workers' compensation
- Documentation of Official Declaration of Natural Disaster status
- Benefit provider's notification of loss of benefit, effective date of lost benefit, and total amount received in 2023
- Court documents verifying loss, date and conditions of loss of child support
- Copy of your/spouse/parent signed 2023 individual federal tax return (1040 Form)
- Copy of your/spouse/parent IRS non tax filing statement
- Copy of all your/spouse/parent W-2 forms & 1099 Statement

SECTION 2

Please select **ONE** option below and answer the corresponding income questions.

Check here if you are requesting an income adjustment based on your family’s completed 2023 federal tax return information. **Provide a signed copy of your/spouse/parent’s 2023 individual federal tax return (1040 Form), ALL W-2 forms and complete Part A only then go to Section 3.**

OR

Check here if you are requesting to use projected 2024 family income. **Complete Part B only and go to Section 3.**

A. In addition to your 2023 federal tax return, please list any additional **untaxed income received in 2023**. If you have nothing to report, put “zero” or “N/A.” Once completed, go to Section 3.

Income Source	Total Amount Received in 2023	Income Source	Total Amount Received in 2023
Veterans non educational benefits	\$	Relatives/Friends	\$
Workmen’s Compensation	\$	Untaxed portion of IRS distribution and pensions	\$
SSI/Social Security (including amounts received for children)	\$	Military & Clergy housing and food allowances	\$
Child Support Received	\$	Other	\$

B. List all income and/or benefits projected for **January 2024 through December 2024**. If you have nothing to report, put “zero” or “N/A.” Provide any applicable documentation listed on page one. Once completed, go to Section 3.

Income Source	Gross Amount Expected for 2024	Income Source	Gross Amount Expected for 2024
Student’s Income	\$	SSI/Social Security (including amounts received for any children)	\$
Student’s Spouse Income (if applicable)	\$	Child Support Received	\$
Student’s Father/ Stepfather Work Income (if applicable)	\$	Relatives/ Friends	\$
Student’s Mother/ Stepmother Work Income (if applicable)	\$	Other (such as IRA distributions, pensions, VA non education benefits, etc.)	\$
Unemployment Benefits	\$	Severance Pay	\$
Workmen’s Compensation	\$	Other	\$

SECTION 3 Certification Statement to be signed by student and parent (if applicable)

I swear under penalty of perjury all of the information contained in this application is true to the best of my knowledge. I understand that providing intentionally false or misleading information in attempt to obtain federal financial aid can result in a fine of up to \$10,000 and/or incarceration.

I understand that failure to provide the required documentation may result in denial of this application. I understand that additional documentation may be requested and that I will provide all requested documentation in order for this request to be considered.

 Print Student’s Name

 Student’s Signature

 Date

 Print Parent Name (if applicable)

 Parent's Signature (if applicable)

 Date