



## 2017-2018 Reduction in Family Income Appeal Form

Name (Print clearly): \_\_\_\_\_ MCC ID: \_\_\_\_\_

### Requests are accepted for review until January 31<sup>st</sup>, 2018

Complete this form to report changes that have occurred since filing your 2017-2018 FAFSA or your 2015 Tax Return. If clarification of your situation is necessary, additional information or documentation may be requested. You must provide all requested documentation. Failure to support your circumstances with evidence will result in your appeal being DENIED. **Submission of this appeal doesn't guarantee a favorable change in your financial aid eligibility.**

**IMPORTANT:** A reduction in income request will not be considered for the following situations: (1) high consumer debt, (2) home mortgage expenses, and (3) car payments/expenses.

### REQUIRED DOCUMENTATION

Dependent Student	Independent Student
<input type="checkbox"/> Completed V1-D Standard Dependent Verification Worksheet	<input type="checkbox"/> Completed V1-I Standard Independent Verification Worksheet
<input type="checkbox"/> A copy of you and your parent(s) Federal Income Tax Transcript for the 2015.	<input type="checkbox"/> A copy of you and your spouse's Federal Income Tax Transcript for the 2015.
<input type="checkbox"/> A copy of you and your parent(s) 2015 W-2 forms.	<input type="checkbox"/> A copy of you and your spouse's 2015 W-2 forms.
<input type="checkbox"/> A copy of your parent(s) last pay stubs for 2017.	<input type="checkbox"/> A copy of you and your spouse's last pay stubs for 2017.
<input type="checkbox"/> A letter detailing the date and circumstances of your parent(s) loss or reduction of income.	<input type="checkbox"/> A letter detailing the date and circumstances of you and/or your spouse's loss, or reduction of income.

### ADDITIONAL REQUIRED DOCUMENTATION by circumstance:

Reason(s) for Appeal: Select all that apply.	Submit:
<input type="checkbox"/> <b>Marital Separation or Divorce.</b> Separation date: MM/DD/YYYY	<ul style="list-style-type: none"> <li>A copy of the divorce decree/separation papers or evidence of separate living accommodations.</li> <li>Documentation of alimony to be received for 2017.</li> <li>Documentation of child support to be received for 2017.</li> </ul>
<input type="checkbox"/> <b>Death of a parent or spouse.</b> Date of death: MM/DD/YYYY	<ul style="list-style-type: none"> <li>Copy of the death certificate.</li> </ul>
<input type="checkbox"/> <b>Loss of employment due to layoff or involuntary termination.</b> Effective date: MM/DD/YYYY	<ul style="list-style-type: none"> <li>A letter of separation from employer on company letterhead (must include last day worked).</li> <li>Copy of last pay stubs for all jobs held in 2017.</li> <li>Copy of Unemployment Income Verification form (UIA 1053), showing benefit amount, start date and # weeks remaining or statement of ineligibility.</li> <li>Documentation of severance pay received</li> </ul>
<input type="checkbox"/> <b>Loss of benefits (received in 2015 and terminated in 2017).</b> Effective date: MM/DD/YYYY	<ul style="list-style-type: none"> <li>Documentation of termination of benefits.</li> <li>Documentation of expected 2017 benefits.</li> </ul>
<input type="checkbox"/> <b>OTHER:</b> Effective date: MM/DD/YYYY	<ul style="list-style-type: none"> <li>Please consult Financial Aid Office to see if your situation qualifies and to determine what supporting documentation will be needed.</li> </ul>

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

\_\_\_\_\_  
Date

\_\_\_\_\_  
Parent Signature (Only for Dependent Students)

\_\_\_\_\_  
Date