



Income Appeal 2009 - 2010

Student Name _____ Valley ID # V _____

Phone _____ Date of Birth _____

The Financial Aid Office recognizes students and their families may experience special circumstances that may affect their family contribution. The income appeal reflects the types of circumstances where professional judgment may be used to make line item changes to the information you reported on your 2009-2010 Free Application for Federal Student Aid.

If you have not already done so, **(1)** Complete the Free Application for Federal Student Aid (FAFSA) over the Internet at www.fafsa.ed.gov or complete the PDF FAFSA by going to www.FederalStudentAid.ed.gov. **(2)** Your request for professional judgment will be evaluated when **(a)** all of the requested documentation is submitted **with** this form, and **(b)** all applicable waiting periods have been met. **(3)** All sources of income **must** be documented. Examples: Signed Federal tax returns, W-2s, annual child support statements (received/paid out), Workman's Compensation, untaxed pensions, and other untaxed income etc. Requested documentation is imaged then destroyed, therefore not available in original format.

SECTION I - Source of Loss of Income — The employee must already have been unemployed for at least 8 weeks and eligibility for unemployment benefits has been determined.

Please write a brief explanation to explain the circumstances(s) for which you are requesting an appeal for professional judgment. Circle the condition(s) number(s) that applies to you and provide all of the documentation required.

1. **Drastic Loss of Taxable Income from Job — Requires documentation in all three areas.**
Independent student, spouse or dependent student's parent or stepparent was employed full-time in 2008 (at least 35 hours a week for a minimum of 30 weeks), but has lost his/her job for a least 8 weeks in 2009 and is no longer employed full-time, and eligibility for unemployment benefits has been determined.

Part A. — Document Loss of Income

- ___ Submit a signed copy of **your, spouse's and dependent student's parent's** 2008 Federal Tax Return and W-2s.
- ___ Statement(s) from previous employer(s) indicating date independent student, spouse's or dependent student's parent's job terminated.
- ___ Total amount of income earned from last job. Submit a copy of last pay stub indicating year-to-date earnings, or W-2, or letter from employer.

Part B. — Unemployment Compensation Did you apply for unemployment compensation? **Yes** **No**

- ___ Submit a copy of the **Monetary Determination Form**, the student, spouse, or parent received. The Monetary Determination form from the Unemployment Office shows the date unemployment benefits began, date benefits end, weekly benefit rate and number of weeks benefit is available.
- ___ If the worker did not get unemployment benefits, attach a statement indicating why. Was the worker eligible for unemployment benefits? **Yes** **No**

Part C. — Projected income for 2009

- ___ Statement(s) from current employer(s) indicating date of hire, hourly wage, and number of hours independent student, spouse or parent works per week.
- ___ Total amount of income earned from current job. Submit a copy of last pay stub indicating year-to-date earnings, or letter from employer, or W-2 form. Show cumulative earnings from January 1, 2009 to December 31, 2009. Include lump sum buy-out or retirement income.

2. **Loss of Benefit/Unearned Income (Severance pay, one-time lump sum payment, child support, unemployment compensation, Workman's Compensation, etc.). Student, spouse or dependent's student's parent, or step-parent received income or a benefit in 2008, but completely lost that income/benefit in 2009. The income/benefit must have been paid by a public/private agency, a company, or a person as result of a court order.**

- ___ Submit a signed copy of **your, spouse's and dependent student's parent's** 2008 Federal Tax Return and W- 2s.
- ___ Documentation from company or agency showing the date your, spouse's or parent's benefit ended and total benefit received in 2009.
- ___ Annual statement from Friend of Court showing date child support ended and total amount received in 2009.

3. **Death of Parent, Stepparent or Spouse** Date of death _____ Circle year: 2008 2009
You have already applied for financial aid, and since that time your parent, stepparent, or spouse died.
 Submit a signed copy of **your, spouse's and dependent student's parent's** 2008 Federal Tax Return and W-2s.
 Submit a copy of death certificate.
4. **Loss of Income Due To Disability** Date of disability _____ Circle year: 2008 2009
Student, spouse or dependent's student's parent or stepparent earned money in 2008, but has not been able to earn money for at least 12 weeks in 2009.
 Submit a signed copy of **your, spouse's and dependent student's parent's** 2008 Federal Tax Return and W-2s.
 Submit documentation from physician showing the start of and anticipated duration of your, spouse's or parent's disability. Your doctor must indicate if the disability is permanent.
 Statement from employer or insurance company detailing duration of and total amount of disability benefits in 2009.
 Letter from physician if student, spouse or parent is unable to work one or more semesters due to illness, accident or disability.
5. **Loss Of Income Due To Natural Disaster** Date of disaster _____ Circle year: 2008 2009
Student, spouse or dependent's student's parent or stepparent earned money in 2008, but has not been able to earn money for at least 12 weeks in 2009 as a result of a natural disaster which occurred in 2008 or 2009.
 Submit a signed copy of **your, spouse's and dependent student's parent's** 2008 Federal Tax Return and W-2s.
 Statement from insurance company or appropriate state or federal agency explaining natural disaster and duration of unemployment and amount of benefit received in 2009.
6. **Loss Of Income Due To Separation or Divorce Of Spouse or Parent** – Date of separation/divorce _____ 200____
You have already applied for financial aid and since that time you or your parents have separated or divorced.
 Submit a signed copy of **your, spouse's or dependent student's parent's** 2008 Federal Tax Return and W-2s.
 Copy of Divorce Decree or statement from your or dependent student's parent's attorney showing: (a) separation date, (b) amount and duration of child support and alimony or maintenance support paid to the custodial parent, (c) division of assets, (d) custody rights for each dependent child in the household, and (e) verification of separate residence.
7. **Other** — Please describe circumstances regarding loss of income. (Documentation: Refer to appropriate items above.) _____

SECTION II – Family Information

Dependent Students: List the people in your parent(s) household including yourself and your parent(s) (including step-parent) even if you don't live with your parents, and your parents' other children, even if they don't live with your parent(s), **if (a)** your parents will provide more than half of their support from July 1, 2009 through June 30, 2010, **or (b)** the children would be required to provide parental information when applying for Federal Student Aid, and other people if they now live with your parents, and your parents provide more than half of their support and will continue to provide more than half of their support from July 1, 2009 through June 30, 2010.

Independent Students: List the people in your household including yourself, your spouse, and your children, if you will provide more than half of their support from July 1, 2009 through June 30, 2010, even if they do not live with you; and other people if they now live with you, and you provide more than half of their support and will continue to provide more than half of their support from July 1, 2009 through June 30, 2010.

Full Name	Age	Relationship to Student	College Attending in 2009-2010
1.		Self	KVCC
2.			
3.			
4.			
5.			
6.			
7.			
8.			

KVCC Financial Aid Office Use Only

Action taken:

Appeal Approved _____ **Appeal Denied** _____ **New EFC #** _____ **Previous EFC #** _____

___ **Used estimated income of:**

___ (Step)Mother ___ (Step)Father ___ Independent Student ___ Spouse

___ Changed number in household ___ Changed number in college

Used professional judgment to review appeal. Approved appeal based on loss of income of:

- ___ mother
- ___ father
- ___ independent student
- ___ spouse

due to :

- ___ loss of job
- ___ loss of benefit or unearned income
- ___ loss of income due to death of spouse or parent
- ___ loss of income due to disability
- ___ loss of income due to natural disaster
- ___ loss of income due to separation or divorce of spouse or parent
- ___ other (list) _____

Additional comments (if any)

FAO Signature _____ Date _____

Income Appeal – Follow-Up Survey Data

ISIR 2008 AGI	ISIR 2008 Additional Financial Information	ISIR 2008 Untaxed Income	Previous EFC #	Projected 2009 AGI	Projected 2009 Additional Financial Information	Projected 2009 Untaxed Income	EFC # After Appeal Approved