

2020-2021 Change of Financial Situation

Section B - Reasons for the Change of Financial Situation

Complete the items below by submitting ALL applicable documents listed under each reason.

A. Medical/dental expenses not paid by insurance and not claimed as a deduction on your 2018 Income Taxes(January 1, 2018 - December 31, 2018): Student Spouse

- As a general rule, these expenses should be at least 20% of your 2018 Adjusted Gross Income before submitting documentation.
Attach proof of payment such as canceled checks or receipts for medical/dental expenses PAID in 2018.
Attach a separate sheet of paper listing the total amount PAID in 2018.

B. Loss of job/reduction in income in 2019 or 2020: Student Spouse

- Attach a statement from your previous employer on company letter head regarding loss of job or change in job status.
Attach documentation of unemployment benefits, i.e. the Maximum Benefit Letter detailing the amount received.
Attach a copy of your most recent pay statement or last pay statement.

C. Reduction in income in 2019 or 2020 due to a disability: Student Spouse

Reduction in income in 2019 or 2020 due to a disability:

D. Loss of benefits or untaxed income in 2019 or 2020 (i.e., child support, disability benefits, etc.): Student Spouse

- Attach a statement from the appropriate agency showing the date the benefit was lost and the monthly amount received before the loss.

E. Divorce or separation of parents AFTER completion of the 2020-2021 FAFSA: Student Spouse

STOP - Do not complete this form.

- Have your custodial parent complete the 2020-2021 Change of Financial Situation - Parent Form.
If there is no custodial parent, see the Dependency Override Request Form.

F. Death of Spouse AFTER completion of the 2020-2021 FAFSA:

- Attach a copy of the spouse's death certificate.

ENTER YOUR UIN ->

Grid of 10 empty boxes for UIN entry.

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Section C - Anticipated Income for 2020 (complete for reasons A, B, C, D, and E)

Report all anticipated taxable and nontaxable 2020 income (January 1, 2020 to December 31, 2020).

EXPECTED TOTAL INCOME AND BENEFITS January 1, 2020 through December 31, 2020

TAXABLE INCOME FROM WAGES (do not include your unemployment income as wages)	Student	Spouse
Document gross wages earned through today's date: <i>Provide most recent pay statement</i>		
Estimated anticipated wages from today's date through December 31, 2020:		
OTHER TAXABLE INCOME:		
Unemployment Income to date and anticipated in 2020: <i>Provide monthly statement</i>		
Severance, Paid Time Off or Vacation Pay Out if not included in gross wages		
Taxable Pension: <i>Provide monthly statement</i>		
Business income, Rents, royalties, and/or annuities		
Maintenance/support from spouse in 2020 (in cases of separation or divorce)		
Taxable income from 401k disbursements or other existing assets: <i>Include year to date gross disbursements and anticipated disbursements</i>		
Other taxable incomes: <i>List the source</i>		
TYPES OF UNTAXED INCOME		
Housing allowance for military or clergy <i>Contract or LES Statement</i>		
Workers Compensation: <i>Provide monthly statement</i>		
Untaxed Disability Income <i>Provide monthly statement</i>		
Child Support Received for all members of your household		
Untaxed Pension <i>Provide monthly statement</i>		
Other Untaxed Income: <i>List the source</i>		

Check the boxes below to confirm you are submitting all required documentation:

- Documentation requested on page 2 pertaining to my change of financial situation
- The 2020-2021 Independent Verification Form and all required verification documents
- A copy of your signed 2018 IRS Federal Tax Return and IRS Schedules 1, 2, and 3
- Copies of all of your 2018 W-2 forms
- A copy of your spouse's signed 2018 IRS Federal Tax Return and IRS Schedules 1, 2, and 3 (only if married)
- Copies of all of your spouse's 2018 W-2 forms (only if married)

Section D - Statement of Certification

I certify that the information provided on this form and any attachments are true and correct. Additionally, it is understood that I must notify Student Financial Aid and Scholarships if the situation outlined in this request changes. If I underestimate my anticipated income, I understand that I may be required to repay previously awarded financial aid. I may also have future Change of Financial Situation requests denied.

Student Signature

Date

ENTER YOUR UIN →

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