University of Illinois Springfield – Office of Financial Assistance
One University Plaza, MS UHB 1015 -- Springfield, Illinois 62703-5407 -- Phone: (217) 206-6724
https://www.uis.edu/financialaid/

2022-2023 Change of Financial Situation - Independent Student

If yours or your spouse's financial situation has changed from what was reported on the 2022-2023 Free Application for Federal Student Aid (FAFSA), use this form to request an evaluation of your financial aid eligibility. This form is meant to be a one-time form, not one that is completed every year, except in special circumstances. Please note, we reserve the right to correct information on the FAFSA, and to select students for verification if we have documents on file for other tax years.

Submission of this form does not guarantee an adjustment to your financial aid.

Complete the following steps:

- ☐ Write a detailed statement explaining your situation and the change in your financial situation.
- ☐ Provide supporting documentation that relates to the change in financial situation.
- ☐ Complete **Sections A, B, C & D**.
- ☐ Submit this form to the Office of Financial Assistance

Section A - Demographic Information (Please Print Clearly)

Student Name:_____ Student Phone:_____

Student Email:_____

Student Address:_____
Number and Street City State Zip Code

Spouse Name (If Applicable):_____

Section B - Reasons for the Change of Financial Situation

Please state the reason for appealing your Financial Status (attach additional pages as needed):

_____

_____

_____

_____

ENTER YOUR 9-DIGIT **UIN**

2223 **CFSI-O** **N**

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Section C – Anticipated Income for 2022

Report all anticipated taxable and nontaxable 2022 income (January 1, 2022 to December 31, 2022).

Taxable Income	**Student**	**Spouse**
Wages/salaries/tips/severance	$	$
Business income (self-employment)	$	$
Other taxable income (i.e., unemployment compensation, social security, taxable pension, taxable 401K, etc.)	$	$
Other taxable income (i.e., unemployment compensation, social security, taxable pension, taxable 401K, etc.)	$	$
Total Taxable Income	$	$
Nontaxable Income	**Student**	**Spouse**
Money received or paid on your behalf (i.e., in kind support) not reported elsewhere on this form. Source of money received:_____	$	$
Other nontaxable income (i.e., worker's compensation, disability income, untaxed pension, etc.)	$	$
Child Support Received	$	$
Total Nontaxable Income	$	$

Possible Supporting Documents:

- ☐ A copy of student's and spouse's (if applicable) signed 2020 IRS Federal Tax Return and IRS Schedules 1, 2, and 3
- ☐ A copy of student's and spouse's (if applicable) signed 2021 IRS Federal Tax Return and IRS Schedules 1, 2, and 3
- ☐ Copies of all student's and spouse's (if applicable) 2020 and/or 2021 W-2 forms
- ☐ Current paystubs with year-to-date earnings
- ☐ Documentation of a life event, benefits, medical expenditures, and/or employer communication

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 The Office of Financial Assistance 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 9-DIGIT **UIN**

2223 **CFSI-O** **N**