



**Reason for Appeal and Required Documentation:**



**One-time income included in 2019 adjusted gross income (AGI).**

**Examples include:** One-time pension/IRA liquidation, settlements, capital gains etc.

1. 2019 IRS Tax Return Transcript or ***signed*** 2019 tax return (1040 form); OR
2. 2019 W-2 Statements; AND;
3. Documentation of one-time income (e.g. 1099, settlement agreement etc.)



**Loss of income due to job change or reduction of income:**

1. 2020 IRS Tax Return Transcript or ***signed*** 2020 tax return (1040 form) OR;
2. 2020 W-2 Statements AND;
3. Completed Estimated 2021 Income Worksheet (page 3 (parent) and 4 (student) of this document) AND;
4. Last pay stub from previous employer AND;
5. If applicable, pay stub from current employer.



**Loss of Child Support:**

1. Signed statement explaining the loss of child support. Include any current monthly child support for other children for the 2021 calendar year.
2. Copy of court documentation of loss of child support that includes date of last payment if available.



**Extenuating medical/dental expenses PAID in 2019 or 2020:**

1. IRS Tax Return Transcript or ***signed*** tax return (1040 form) for 2019 and/or 2020 AND;
2. 2019 and/or 2020 W-2 Statements AND;
3. If available, 2019 and/or 2020 Schedule A; If Schedule A was not filed, provide documentation of expenses paid which were not reimbursed such as copies of bills showing amounts paid.



**Divorce or separation:**

1. 2019 IRS Tax Return Transcript or ***signed*** 2019 tax return (1040 form) AND;
2. 2019 W-2 Statements AND;
3. If applicable, explanation of which parent was the source of any non wage income (e.g. which parent received untaxed income, capital gains, etc) AND;
4. A signed statement indicating month and year of separation and divorce and which parent the student will live with most during the 2021-2022 school year.

**Note: Independent students** please provide ONLY you and your spousal/ex-spousal information above.



**Death of Parent or Spouse:**

1. IRS Tax Return Transcript or ***signed*** tax return (1040 form) for 2019 and/or 2020 AND;
2. 2019 and/or W-2 Statements AND;
3. Copy of obituary or death certificate or funeral program.

I certify that all the information reported on this form is true, complete and correct. I understand that any false statements could be cause for denial, reduction, withdrawal or repayment of financial aid.

Please sign before submitting. We **can** accept digital signatures if drawn in electronic form.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Signature (If applicable): \_\_\_\_\_ Date: \_\_\_\_\_

### 2021-2022 Estimated 2021 Income Worksheet - Parent(s)

Student Name: \_\_\_\_\_ NSHE: \_\_\_\_\_

Complete the Estimated Income Worksheet when you are able to provide an accurate, good-faith estimate of projected 2021 income from all sources. Please be sure to sign and date the certification statement below.

**If any item does not apply, enter "NA". Do not leave any items blank.**

<b>Source Taxable Income</b>	<b>Received To Date</b>	<b>Remainder Of 2021 <i>Estimated</i></b>	<b>Total 2021</b>
First parent's wages (before taxes)			
Second parent's wages (before taxes)			
Taxable interest/dividend income			
Net rental income			
Net business/farm income			
Taxable pensions/annuities/IRA distributions			
Capital gains			
Trust income			
Partnership income			
Alimony received			
Unemployment income/benefits			
Taxable Social Security benefits			
Severance/Settlement Payments			
Other taxable income			
<b>Source Untaxed Income</b>	<b>Received To Date</b>	<b>Remainder of 2021 <i>Estimated</i></b>	<b>Total 2021</b>
Untaxed pension and annuity distributions (exclude rollovers)			

Untaxed IRA distributions (exclude rollovers)			
Child Support Received			
Payments to tax deferred pension/savings plans			
Tax exempt interest			
IRA/SEP/SIMPLE/KEOGH Deductions			
Veterans <b>Non-Educational</b> Benefits			
Payments to tax-deferred retirement savings plans			
Housing/food/living allowance for members of the clergy, military & others			
Other untaxed income			
<b>Source Additional Income Information</b>	<b>Received to Date</b>	<b>Remainder of 2021 <i>Estimated</i></b>	<b>Total 2021</b>
Child Support PAID			
Alimony PAID			
Education Credits			

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Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_

**2021-2022 Estimated 2021 Income Worksheet - Student**

Student Name: \_\_\_\_\_ NSHE: \_\_\_\_\_

Complete the Estimated Income Worksheet when you are able to provide an accurate, good-faith estimate of projected 2021 income from all sources. Please be sure to sign and date the certification statement below.

**If any item does not apply, enter "NA". Do not leave any items blank.**

<b>Source Taxable Income</b>	<b>Received To Date</b>	<b>Remainder Of 2021 <i>Estimated</i></b>	<b>Total 2021</b>
Student's wages (before taxes)			
Spouse's wages (before taxes) if applicable			
Taxable interest/dividend income			
Net rental income			
Net business/farm income			
Taxable pensions/annuities/IRA distributions			
Capital gains			
Trust income			
Partnership income			
Alimony received			
Unemployment income/benefits			
Taxable Social Security benefits			
Severance/Settlement Payments			
Other taxable income			
<b>Source Untaxed Income</b>	<b>Received To Date</b>	<b>Remainder of 2021 <i>Estimated</i></b>	<b>Total 2021</b>
Untaxed pension and annuity distributions (exclude rollovers)			
Untaxed IRA distributions (exclude rollovers)			

Child Support Received			
Payments to tax deferred pension/savings plans			
Tax exempt interest			
IRA/SEP/SIMPLE/KEOGH Deductions			
Veterans <b>Non-Educational</b> Benefits			
Payments to tax-deferred retirement savings plans			
Housing/food/living allowance for members of the clergy, military & others			
Other untaxed income			
<b>Source Additional Income Information</b>	<b>Received to Date</b>	<b>Remainder of 2021 <i>Estimated</i></b>	<b>Total 2020</b>
Child Support PAID			
Alimony PAID			
Education Credits			

**Certification:** I certify that all the information reported on this form is true, complete and correct. I understand that any false statements could be cause for denial, reduction, withdrawal or repayment of financial aid.

Please print and sign before submitting. We **can** accept digital signatures if drawn in electronic form.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Printed Name: \_\_\_\_\_