Income Reduction Request Dead	ines (due by Noon)				
1 <sup>st</sup> Day to Submit: 7/6/2015 Fall 2015: 11/20/2015 Spring 2016: 4/29/2016 Summer 2016: 7/10/2016	SAN DIEGO MESA COLLI INCOME REDUC 201			OFFICE	# 26
Student Name:		(	CSID #:		
<ul><li>have had some other dram</li><li>If you are consider</li></ul>	rm if your income and/or your spous- natic financial changes <b>due to circun</b> ared an <b>INDEPENDENT</b> student you ared a <b>DEPENDENT</b> student you wi	nstances bey u will only p	ond your con rovide informa	<b>itrol</b> . ation about yo	ourself and/or your spouse
NOTE: Be ready to prov	ne reason, giving the date of the contract of	C			Month and Year (no later than 2015)
	nt or change in employment le (i.e.TANF, social security)	□ self □ self	□ spouse □ spouse	□ parent □ parent	
	ation	$\Box$ self	L spouse	$\Box$ parent	
			$\Box$ spouse	□ parent	
5. Disability of		$\Box$ self	$\Box$ spouse	$\Box$ parent	

## **SECTION 2: REQUIRED**

Other (explain)

6.

*Please provide a detailed written statement on a separate sheet of paper*, to explain the circumstances that contributed to the situation. If you had one-time income (i.e., inheritance, IRA or pension distribution) during 2014 that you will no longer have in 2015, identify the source of income and explain how funds were spent or invested (documentation required).

## **INCOME REDUCTION REQUEST CHECKLIST** (Please check all that apply)

WRITTEN STATEMENT (required for ALL Income Reduction Requests, will not be accepted without)
Income Reduction Request Form (required)
Verification Worksheet (Dependent or Independent) (required)
2014 IRS Tax Return Transcripts including all schedules and W2's (Required for Both parent and/or student if applicable) [after 11/30/2015, you must provide a 2015 IRS Tax Transcript(s) also]
A copy of your Unemployment Benefits (i.e. eligibility award letter) from the Employment Development Department (EDD).
Agency Certification form to be completed by any office from which the student/spouse and/or parents received or is currently receiving cash benefits in 2014 (example: SSI benefits, Welfare benefits etc.) For Military Discharge within 2014 or 2015, DD214 showing discharge status.
Letter(s) from former employer(s) indicating last working day, reason for separation and final pay.
Final Pay Stubs
For all jobs that you are still currently employed; an employment letter indicating the gross year-to-date earnings, current rate of pay, and average number of hours worked per week.
Proof of "Year to Date" untaxed income for 2015 and anticipated amounts for the remaining of 2015.
<ul> <li>Any other sources of income for 2015 including, but not limited to:</li> <li>LES Showing subsistence benefits/ Chapter 31 Benefits</li> <li>VA Work-Study paystubs</li> <li>Other untaxed income (including Worker's Compensation, Cash received from family and friends and inheritance.</li> </ul>

NOTE: You will need to provide ALL required documentation before an assessment of your petition can be made. Incomplete forms will not be accepted & unsubstantiated forms will be dismissed.

A. Disclose and provide documentation for 2015 Taxable and Un-taxable Income <u>Already Earned</u>. [As Of Today] (Write \$0 if an item does not apply). If you submit this income reduction on or after 11/30/2015, you must provide a 2015 IRS Tax Transcript

Taxable Income Sources	Student	Spouse	Mother	Father
Wages, Salaries & tips				
State Unemployment Benefits (EDD)				
Pensions or Annuities Distribution				
Alimony Received				
Cashed IRAs, 401ks or Stock Bonds Owned				
Other Taxable Income (specify)				
Total 2015 Taxable Income Received	\$	\$	\$	\$
Un-Taxable Income Sources	Student	Spouse	Mother	Father
Social Security Benefits	Student	Spouse	Mother	Father
	Student	Spouse	Mother	Father
Social Security Benefits	Student	Spouse	Mother	Father
Social Security Benefits Temporary Assistance for Needy Family	Student	Spouse	Mother	Father
Social Security Benefits Temporary Assistance for Needy Family Child Support Received	Student	Spouse	Mother	Father
Social Security Benefits Temporary Assistance for Needy Family Child Support Received Disability Payments	Student \$	\$	Mother	Father

**B.** Disclose and provide documentation on 2015 <u>Expected/ Projected</u> Taxable and Un-taxable Income. [For the Remainder of 2015] (Write \$0 if an item does not apply). Do not complete this section if you are submitting the form after November 30, 2015.

After 11/30/2015, all Incon	e Reduction forms must	he submitted with a	conv of your 20	15 IRS Tay Retur	n Transcrint
AILEI 11/30/2013, all IIICOI	ie Reduction for my must	be submitted with a	copy of your 20	13 INS TAX NEUL	n manscript.

Taxable Income Sources	Student	Spouse	Mother	Father
Wages, Salaries & Tips				
State Unemployment Benefits (EDD)				
Pensions or Annuities Distribution				
Alimony Received				
Cashed IRAs, 401ks or Stock Bonds Owned				
Other Taxable Income (specify)				
Total Expected 2015 Taxable Income	\$	\$	\$	\$
Un-Taxable Income Sources	Student	Spouse	Mother	Father
Social Security Benefits				
Temporary Assistance for Needy Family				
Child Support Received				
Disability Payments				
Other Untaxed Income and /or Benefits				
Cash, Savings or Money Received				
Total Expected 2015 Untaxed Income and Benefits	\$	\$	\$	\$
TOTAL Expected 2015 Income (Sum of A totals & B totals)	\$	\$	\$	\$

I certify that the information provided on this form is true and correct. I understand that this information will be used to determine my eligibility for financial aid and that false or misleading information may be cause for termination of my financial aid and repayment of funds received.

 Date \_\_\_\_\_

Date \_\_\_\_

Parent Signature

(**Required for dependent students** if parent's income is reported on this form)

This request is valid only at San Diego Mesa College. The decision of the Financial Aid Office is *Final*. It is possible that the Department of Education may select your FAFSA for further verification resulting in additional documentation needed after this form is processed.