



Enter Student's
CWID Here:

Student Income Appeal 2023-2024

Appeal Deadlines: **November 5** if attending Fall only | **April 7** if attending Academic Year

Student's Name: _____ Counselor's Name: _____

Required Documents for All Appeals

Attach a signed, written statement addressing the following:

1. Detailed explanation as to the reason for the decrease in income **AND**
2. Why you feel this appeal should be considered

Possible Reasons for Appeal

- Decreased income due to fewer hours, new employment, furlough, etc.
- Separation of work due to layoff or termination
- Legal separation or divorce
- Termination of untaxed income
- Death of a spouse after filing financial aid application
- Other, including one time income received in 2021 no longer available

Documents Required (if checked)

- Tax Return (1040 and all schedules) or Tax Return Transcript for 20____
- W-2 for 20____ Student Spouse
- Most recent paystubs from all employers in 20____
- Severance compensation letter
- EDD Notice of Unemployment Insurance Award Letter
- Signed letter from employer showing decreased hours and effective date
- Legal separation documentation, attorney's letter, or utility bills that show spouse lives separately
- Copy of the Divorce Decree that states the date of change in marital status, alimony, or child support
- Letter from agency discontinuing payment with effective date (child support, disability, EDD, etc.)
- Documentation from agency which shows amount of income received prior to termination
- A copy of death certificate or obituary
- A statement regarding value of accounts payable upon death of spouse (life insurance policy payment, etc.)

Other: _____
Other: _____

Comments:



Return to: Office of Financial Aid
P.O. Box 6804 GH-146 Fullerton,
CA 92834-6804

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INSTRUCTIONS: Provide the best estimate of income received by you (and/or your spouse) from all sources listed below. Report "0" if nothing was received. **Do Not Leave Any Blanks.**

List amounts received for the specified period of: _____ to _____

Income for Specified Time Period Noted Above			
Income Earned from Work- Student	\$	Child support received for all children	\$
Income Earned from Work- Spouse	\$	Veteran's non-educational benefits	\$
Payments to IRA, 401K, or other plans	\$	Worker's compensation	\$
Disability benefits (not SSI)	\$	Housing, food, and other living allowances	\$

NOTE: If you have jointly owned assets and are now separated or divorced, provide only yours (the student's) portion of assets and debts. **Do Not Leave Any Blanks.**

Do NOT include:

- A home, if it is the principal residence
- Student financial aid awards
- Personal or consumer debts
- A farm, if it is the principal residence and you participate in the farm's operations
- The value of retirement plans (pensions, IRA's, Keogh plans, etc.)
- Any debts that are not related to the assets listed below

Student Asset Information as of Today		
Cash, savings, and checking accounts	\$	
	Value	Debt
Other real estate and investments	\$	\$
Business	\$	\$
Farm	\$	\$
<input type="checkbox"/> Check here if your family business or family farm has fewer than 100 full-time or full-time equivalent employees.		

CERTIFICATION: By signing this form, I (we) certify that all of the information reported on this form and any attachments hereto is true, complete, and accurate. I (we) agree to provide additional proof of the information we have reported if requested to do so.

Print Student's name: _____ CWID: _____

Student's signature: _____ Date: _____

Warning: If you give false or misleading information on documents submitted to the Office of Financial Aid, you may be fined, sentenced to jail, or both.