

Step 2 - :KFNOQU HURPH 'RRX :LK WRHWHH

Please check the appropriate box for the request you are making. Only one request will be considered for 202 -202:

Option #1. This option is only available up until November 1, 202. I am requesting that NOVA Financial Aid staff recalculate my FAFSA results using 202 completed tax information. I am submitting my (and my spouse's, if applicable), 202 IRS tax return transcripts with applicable schedules (1,2 or 3) and 202 W2's or 202 IRS tax return transcripts with applicable schedules (1,2 or 3) and 202 W2's for me and my parent(s), if parental information is required on the 202 -202 FAFSA. **If no taxes were filed in 202 for you, your spouse or parent(s), please provide a detailed statement regarding any income earned from work, untaxed income, or any other sources of income received in 202 for each applicable individual mentioned above. The statement must be signed by the student, spouse (if applicable) and parent(s) (if applicable). W2's required for all non-tax filers. If no taxes were filed, please complete page 3 of this form.**

Option #2. This option is not available until after July 1, 202 and only up until November 1, 202 . I am requesting that NOVA Financial Aid staff recalculate my FAFSA results using 202 estimated tax information. I will submit:

- A signed statement indicating all jobs worked in 202 for myself, my spouse (if applicable) and my parent(s) (if parental information is required on the 202 -202 FAFSA). Please also complete page 3 of this appeal form.
- Copies of most recent/last 202 pay stubs for all jobs worked (must include year-to-date earnings).
- Copies of spouse's most recent/last 2025 pay stubs for all jobs worked (must include year-to-date earnings), if applicable.
- Copies of parent(s) most recent/last 202 pay stubs for all jobs worked (must include year-to-date earnings) for each parent whose information is required to complete the FAFSA.
- As of date of submission, documentation of all untaxed income earned by me, my spouse, if applicable, and my parent(s), if parental information required on the FAFSA.

Option #3: For requests submitted after November 1, 202. I am requesting an income recalculation using my 202 tax and income information. I will submit my (and my spouse's, if applicable) 202 IRS tax return transcripts with applicable schedules (1,2 or 3) and W2's or 202 IRS tax return transcripts with applicable schedules (1,2 or 3) and W2's for me and my parent(s) (if parental information is required on the FAFSA), plus documentation of all untaxed income. **If no taxes were filed in 202 for you, your spouse or parent(s), please provide a detailed statement regarding any income earned from work, untaxed income, or any other sources of income received in 202 for each applicable individual mentioned above. The statement must be signed by the student, spouse (if applicable) and parent(s) (if applicable). W2's required for all non-tax filers. If no taxes were filed, please complete page 3 of this form.**

Income reduction appeals that do not have proper supporting documentation will not be reviewed and will be declined. You, your spouse, or your parents might be required to provide additional information and documentation that will support your request for recalculation due to income reduction. All of the information on all pages of this form are true and complete to the best of my knowledge.

Signature of Student

Date

Signature of Spouse (if married)

Date

Signature of Parent (if parental information on FAFSA)

Date

For each job worked in 2023, please indicate the person (student, spouse, parent 1, parent 2), the company or business name, start date, end date, if applicable, and whether the person is currently employed, was laid off, was terminated (resigned) or was furloughed. Please list ALL jobs worked in 2023. If any were self-employed, please include a profit and loss statement for business. Use back of page if additional space is needed.

Person	Company Name/Business	Start Date	End Date (If applicable)	Currently employed	Laid Off	Terminated/ Resigned	Furloughed
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>
_____	_____	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>

Please provide information on funds received for any items below that apply. If more than one person has each item please add them together for the YTD amount and the projected amount. (Please fill in all amounts. Please enter "o" in all boxes if they do not apply)					2023 Year to Date Amount Received (1/1/23 to Today)	Projected 2023 Amount (Today to 12/31/23)	
	Who receives:	Student	Spouse	Parent 1	Parent 2		
Unemployment			<input type="checkbox"/>	<input type="checkbox"/>			
Severance Pay							
Workers Compensation							
IRA Distributions – Taxable or untaxable				<input type="checkbox"/>			
Pensions – Taxable or untaxable			<input type="checkbox"/>				
Disability Benefits		<input type="checkbox"/>	<input type="checkbox"/>		<input type="checkbox"/>		
Child Support Received		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Veteran’s non-education benefits.		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>			
Other taxable or untaxed income not reported above		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		