

Request for Recalculation Due to Income Reduction 2023-2024

Student Name: _____ Student ID#: _____

Complete this form if your, your spouse's, or your parents' financial situation has changed significantly from the information you entered on the FAFSA for the 2023-2024 school year. **Deadline:** The request would need to be submitted prior to the end of the last semester you attend within the award year or prior to your last date of attendance within an award year, whichever is earlier.

For students who previously received approval for a 2022-2023 income reduction using projected income: Should your actual 2022 IRS tax return transcripts submitted with this appeal reflect significant discrepancies from the information processed on the 2022-2023 income reduction, adjustments will be made to the 2022-2023 file accordingly.

Before we will consider an income reduction, we must verify that the information originally submitted on the FAFSA is correct. If you have not already completed the electronic verification process, via Inceptia Verification Gateway, you will shortly receive an email requesting you complete the electronic verification process.

STEP 1 - Reason for Appeal: There are five conditions under which recalculations will be considered. Check the appropriate condition that applies to you and your family and complete the information for that circumstance.

- Loss of Job/Decrease in Income:** You, your spouse or your parent(s) lost a job or is no longer employed full-time. **You must submit a signed statement indicating the circumstances and either a copy of the unemployment benefits statement, the letter of termination, or a signed statement indicating loss of job on company letterhead from the former company. Please include the dates of job loss or switching to part-time employment in your signed statement.**
- Loss of Untaxed Income:** You, your spouse or your parent(s) received some form of untaxed income or benefit and have partially or completely lost that income or benefit. **Attach a signed statement explaining the benefit and circumstances.**
- Loss of Taxable Income:** You, your spouse or your parent(s) received other taxable income such as unemployment, retirement, etc. and have completely lost that income or benefit. **Attach a signed statement explaining the benefit and circumstances.**
- Death of Spouse or Parent(s):** Your spouse or parent(s) for whom income was submitted on the FAFSA has died. **Please submit a copy of the death certificate.**
- Unusual/Unreimbursed Medical Expenses:** You, your spouse or your parent(s) paid unusual medical/dental expenses (over \$2000 out-of-pocket and not reimbursed by insurance) in 2021 or 2022. **Attach a detailed explanation, listing the expenses paid in either 2021 or 2022, and documentation to show expenses. (A year-end statement from your health insurance company is ideal documentation.)**

Step 2 - Which Calendar Year's Income Do You Wish to Be Considered?

Please check the appropriate box for the request you are making. Only one request will be considered for 2023-2024:

Option #1. This option is only available up until November 1, 2023. I am requesting that NOVA Financial Aid staff recalculate my FAFSA results using 2022 completed tax information. I am submitting my (and my spouse's, if applicable), 2022 IRS tax return transcripts with applicable schedules (1,2 or 3) and 2022 W2's or 2022 IRS tax return transcripts with applicable schedules (1,2 or 3) and 2022 W2's for me and my parent(s), if parental information is required on the 2023-2024 FAFSA. **If no taxes were filed in 2022 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 2022 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, 2023 and only up until November 1, 2023. I am requesting that NOVA Financial Aid staff recalculate my FAFSA results using 2023 estimated tax information. I will submit:

- A signed statement indicating all jobs worked in 2023 for myself, my spouse (if applicable) and my parent(s) (if parental information is required on the 2023-2024 FAFSA). Please also complete page 3 of this appeal form.
- Copies of most recent/last 2023 pay stubs for all jobs worked (must include year-to-date earnings).
- Copies of spouse's most recent/last 2023 pay stubs for all jobs worked (must include year-to-date earnings), if applicable.
- Copies of parent(s) most recent/last 2023 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, 2023. I am requesting an income recalculation using my 2023 tax and income information. I will submit my (and my spouse's, if applicable) 2023 IRS tax return transcripts with applicable schedules (1,2 or 3) and W2's or 2023 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 2023 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 2023 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"/>	<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 "0" in all boxes if they do not apply)	Who receives:				2023 Year to Date Amount Received (1/1/23 to Today)	Projected 2023 Amount (Today to 12/31/23)
	Student	Spouse	Parent 1	Parent 2		
Unemployment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Severance Pay	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Workers Compensation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
IRA Distributions – Taxable or untaxable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Pensions – Taxable or untaxable	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
Disability Benefits	<input type="checkbox"/>	<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"/>	<input type="checkbox"/>		
Other taxable or untaxed income not reported above	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		