

2018-2019 Guidelines for Income Reassessment

A financial aid administrator (FAA), under authority of federal regulation, may adjust your Expected Family Contribution (EFC) based on your special circumstances and your most current financial status. This adjustment is valid only at the school making the change. This is a subjective process and there is no requirement that two similar cases shall have the same outcome.

CATEGORY	DOCUMENTATION
<p style="text-align: center;">UNEMPLOYMENT OR CHANGE IN EMPLOYMENT</p> <p>You and/or your parent(s), or you and/or your spouse earned money and have lost this source of income since filing the FAFSA.</p> <p>You and/or your parent(s), or you and/or your spouse worked full time and are no longer working full time now, and/or suffered a reduction in hours or reduced wages.</p> <p>You are no longer working or no longer working the same number of hours due to your school schedule.</p>	<p>Submit the following documents:</p> <ul style="list-style-type: none"> • Most recent pay stubs showing YTD earnings for all jobs held within the last 12 months. • Letter of Unemployment Insurance Claim Information or other documentation showing unemployment benefits dates, amounts received, and value of benefits remaining OR Letter from employer stating the cause for change in hours or employment status. • Personal statement and supporting documentation.
<p style="text-align: center;">SEPARATION OR DIVORCE</p> <p>Your parents, or you and your spouse have become separated or divorced since filing 2016 taxes.</p>	<p>Submit the following documents:</p> <ul style="list-style-type: none"> • Copy of the divorce decree, and/or proof of separate domiciles
<p style="text-align: center;">DEATH</p> <p>One of your parents or your spouse worked in 2016 and their income was reported on the FAFSA, but is now deceased.</p>	<p>Submit the following documents:</p> <ul style="list-style-type: none"> • Death certificate • Proof of income generated by the deceased individual after 12/31/16.
<p style="text-align: center;">DISABILITY</p> <p>You and/or your parent(s), or you and/or your spouse experienced difficulty earning income due to a recent and/or unanticipated disability.</p>	<p>Submit the following documents:</p> <ul style="list-style-type: none"> • Proof of disability • Proof of YTD earnings
<p style="text-align: center;">ONE-TIME INCOME</p> <p>You and/or your parent(s), or you and/or your spouse received income in 2016 (such as inheritance, early withdrawal of pension/401K/IRA) that is not typical or expected to be received after 12/31/17.</p>	<p>Submit documentation showing proof of the non-recurring nature of the income, such as:</p> <ul style="list-style-type: none"> • Copy of 2016 IRS tax document that reflects the source of income (IRS form 1040, 1099, etc.)
<p style="text-align: center;">LOSS OF TAXABLE OR UNTAXED BENEFITS</p> <p>You and/or your parent(s), or you and/or your spouse received unemployment benefits or some other form of untaxed income in 2016 and lost that income at any time after 12/31/17.</p>	<p>Submit the following document:</p> <ul style="list-style-type: none"> • Letter/notice from agency indicating benefits have been terminated
<p style="text-align: center;">UNREIMBURSED MEDICAL EXPENSES</p> <p>You and/or your parent(s), or you and/or your spouse paid medical/dental bills at any time after 12/31/16 not covered by insurance.</p>	<p>Submit the following document:</p> <ul style="list-style-type: none"> • Receipts or cancelled checks showing payments made in full, or • Schedule A of your 2016 Federal Income IRS tax transcript

All students will be notified with a message regarding the outcome on their MyPima > Financial Aid > My messages.

2018-2019 Request for an Income Reassessment

Student's Full Name:	PCC Student ID Number: A
Student's Phone Number (include area code):	Student's Pima Email:

Check all that apply:

- Unemployment or Change in Employment
- Separation or Divorce (Dependent students must provide copy of parents' 2016 tax transcripts and all required W-2's; Independent students must provide a copy of spouse's 2016 tax transcripts and all required W-2's)
- Death
- One-Time Income (copy of 2016 tax transcript required)
- Unreimbursed Medical Expenses
- Disability
- Loss of Taxable or Untaxed Benefits
- Other: _____

I must submit the following documents and understand that failure to submit all documentation will result in denial:

Typed Statement: Provide a typed and signed statement clarifying the special circumstances resulting in a change in income. The statement must include a detailed account (timeline) of these events and include a projection of income for the next 12 months (income may include wages, unemployment income, workman's compensation, child support, etc).

Supporting Documentation: Provide appropriate documentation to substantiate your circumstances. For acceptable documentation, see the chart on page 1 of this form. The Financial Aid Administrator will determine the sufficiency of the documentation in accordance with the circumstances presented.

Student Signature: _____

Date: _____

Parent signature: _____

Date: _____

(Parent signature required for dependent students only)

All students will be notified with a message regarding the outcome on their MyPima > Financial Aid > My messages.

FINANCIAL AID OFFICE USE ONLY		
<input type="checkbox"/> Approved	<input type="checkbox"/> Denied	
<input type="checkbox"/> Reviewed/no changes	<input type="checkbox"/> New EFC	
Employee Signature:	Date:	Trans. #:

Scan and upload using the MyPima FA Document Upload portal, or submit to any campus Financial Aid Advisor in the Student Services Center if you are unable to upload.