

Dependent Student Income Reduction Appeal
2024 - 2025

Student Name _____ ID _____

Complete this form if your family's income for 2023 or 2024 is significantly less than the 2022 income used when you applied for student financial aid for the 2024-2025 school year. Information from this form, your 2024-2025 application, and supporting documentation will be used to determine if your eligibility for financial aid can be recalculated due to special conditions.

Complete the following information for all employers for 2023 or 2024:

Employer name	Still employed by this employer? Yes or No	Last date of work at this employer	Who worked for this employer? Student/Spouse

	Parent	Parent's Spouse
Gross earnings for 2023 or 1/1/24 through today	\$	\$
Estimated earnings from today's date to 12/31/24	\$	\$
Unemployment	\$	\$
Social Security Benefits	\$	\$
Aid to Families with Dependent Children (AFDC/TANF)	\$	\$
Child support received	\$	\$
Other income	\$	\$

We have live assistance available 24/7 at our online Student Services Support Center: visit <https://mysupport.germannacollege.edu> to chat, create a case and submit documents or call 855-874-6681.

A. Dependent Student’s Family Information

List below the names and ages of all members in your PARENT’S household that meet the definition here:

- Yourself and your parent(s) (including a stepparent) even if you do not live with your parent(s)
- Your parent(s)’ other children *if your parent(s) will provide more than half of their support from July 1, 2024, through June 30, 2025, or if the other children would be required to provide parental information if they were completing a FAFSA for 2024-2025. Include children who meet either of these descriptions, even if they do not live with your parent(s).*
- Other people if they now live with your parent(s) and your parent(s) provide more than half of their support and will continue to provide more than half of their support through June 30, 2025.

NOTE: DO NOT INCLUDE PARENT COLLEGE INFORMATION BELOW. IF IT IS LISTED IT WILL BE DISREGARDED.

Full Name <u>of each</u> Household Member	Age	Relationship	College Name (if enrolled)	Will be Enrolled at Least ½ Time
<i>Missy Jones (example)</i>	18	<i>Sister</i>	<i>Central University</i>	Yes
		<i>Self</i>		

The following items must be attached, or your request cannot be evaluated:

1. Federal US tax transcript for 2022 for both parents if the IRS Data Retrieval Tool was not used (www.irs.gov/transcript)
2. All 2022 W-2 Form(s)
3. A statement from all former employers that verifies the last date of employment
4. Most recent paystubs from all 2023 or 2024 employers showing year-to-date earnings or 2023 Federal US tax transcript for both parents
5. Verification of the amount, start date and end date of all unemployment benefits
6. Detailed explanation for the request

All of the information on this form is true and complete to the best of my knowledge.

Signature of Student: _____ Date: _____

Signature of Parent: _____ Date: _____

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