

## INCOME APPEAL FORM DUE TO SPECIAL CIRCUMSTANCES 2024-2025 ACADEMIC YEAR

2500 E. Nutwood Ave. Fullerton, CA 92831 (714) 879-3901 x2638 FAX (714) 681-7421

**Financial Aid** 

Information provided to our office suggests that you or your parent(s) received less income in 2023 than in 2022. To determine the impact this may have on your eligibility for financial aid, complete this form in its entirety, and provide your "best guess" of income, entering "\$0" when appropriate. **Please print all responses.** Return the completed form to the above address. If you receive additional grant funds as a result of your appeal, the University will require that you make use of all loan funds offered to you. If you do not use the loans, you may forfeit the additional grant funds. Completing this form allows the Office of Financial Aid to determine if any (*or additional*) aid resources may be available to the student. It is not a guarantee.

Student's Name:	HIU ID#:		
Person Affected:	Relationship to Student:		
Give the reasons for the change in income, effective for 2024.	date, and provide a brief explanation of why a difference in income is expected		
Benefits stopped or reduced as of//	🖵 Death on// 🛄 Divorce/Separation on//		
Source:			
Unemployment, as of//	□ One-time occurrence of income received on//		
□ Other:	Source:		

Please submit the following documents:

- Verification Worksheet
  Found online at: http://www.hiu.edu/undergrad/finaid/forms/
- Copy of 2023 Tax Return Transcripts
- W-2's
- Separation notice (*if applicable*)
- Last pay stub (most recent pay stub if applicable)
- Unemployment Summary (if applicable)
- If new employment copy of pay stub
- Documentation of untaxed income

The parent(s) you live with are responsible for providing information on the federal application (*FAFSA*). If the income of a custodial parent is expected to be significantly different in 2024, **complete all five "parent lines" for each time period.** 

If your income is expected to be significantly different in 2024, **complete all three "student lines" for each time period.** 

	Type of Income	Actual 01/01/23 - 12/31/23	Actual or Estimated 01/01/24 - 12/31/24
Parent	Father (wages, salaries, etc.)	\$00	\$00
	Mother (wages, salaries, etc.)	\$00	\$00
	Unemployment Compensation	\$00	\$00
	Other Taxable Income <sup>1</sup>	\$00	\$00
	Untaxed Income <sup>2</sup>	\$00	\$00
Student	Wages	\$00	\$00
	Unemployment Compensation		
and	Other Taxable Income <sup>1</sup>	\$00	\$00
Spouse	Untaxed Income <sup>2</sup>	\$00	\$00

<sup>1</sup>Include alimony, annuities, business and farm income, capital gains, interest/dividends, pensions, rents, taxable social security, and any other taxable income sources.

<sup>2</sup>Workers comp, disability, money received on your behalf, child support received, VA non-education benefits.

**Certification:** This information is complete and correct. I understand that it will be used to determine eligibility for federal financial aid, and that by giving false or misleading information I may be subject to a fine, prison sentence, or both.

Student Signature	Date	() Phone
Signature of the Affected Parent	Date	) Daytime phone of the Affected Parent
Notos	FOR OFFICE USE O	
Notes:		Approved
		Denied