



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

Financial Aid

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

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 date, and provide a brief explanation of why a difference in income is expected for 2024.

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

