Financial Aid Office



El Camino College (ECC) - 16007 Crenshaw Blvd. ◆ Torrance, CA 90506 21-310-660-3493 ◆ 및 www.elcamino.edu ECC Compton Center (COM) - 1111 E. Artesia Blvd., E-17 ◆ Compton, CA 90221 21-310-900-1600 x 2935 ◆ 및 www.compton.edu

2014-2015 REQUEST FOR REVIEW OF AWARD YEAR INCOME DATA (Dependent Student)

SPECIAL CIRCUMSTANCES

Federal regulations require all applicants to report calendar year 2013 income figures on their 2014-2015 Free Application for Federal Student Aid (FAFSA). Federal regulations also allow the Financial Aid Office to revise the information on your financial aid application for award purposes year 2014-2015, if documented special circumstances exist. Examples of special circumstances include: loss of student's or parents' income due to layoff or termination of employment, separation, divorce, or other mitigating circumstances beyond your or your parent's control.

By following the instructions below you may request a review of income data. If your request is granted, the Financial Aid Office will change the income information originally reported on your FAFSA to reflect your and your parents' income for the 2014-2015 award year. All requests will be reviewed by a Financial Aid Advisor. Not all requests are granted. Requests are approved or denied based on the information provided.

Required Documentation:

In order for a Financial Aid Advisor to review your request, you must provide documentation of your special circumstances and submit **ALL** of the following forms:

Parents' 2013 IRS Transcript of Tax Return (ONLY REQUIRED IN	IRS DATA RETRIEVAL WAS NOT
Ctudent's 2012 IDC Trops swint of Toy Deturn	HED INSTRUCTIONS)

- ➤ Student's 2013 W-2's
- > Parents' 2013 W-2's

>	Parents' 2014 IRS Transcript of Tax Return	(IF APPEAL IS SUBMITTED AFTER APRIL 15, 2015)
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Parents' 2014 W-2'sStudent's 2014 W-2's	(IF APPEAL IS SUBMITTED AFTER JANUARY 31, 2015)
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Included in this packet are the following:

- 2014-2015 Personal Statement of Explanation
- 2014-2015 Statement of Information
- 2014-15 Parents' Projected Award Year Income Statement
- 2014-15 Student's Projected Award Year Income Statement
- Parents' Statement of Projected Basic Living Expenses

Supporting documentation:

You must also provide supporting documentation of your special circumstances. Examples of acceptable documentation are listed below. Requests submitted without supporting documentation may be delayed or denied until the documentation is received.

- > Copies of current or final pay stubs, benefit checks or employer statements for each job
- Copy of termination notice or letter from employer confirming termination date
- Unemployment Award Letter and the most recent Unemployment check stub
- > Proof of parents' separation or divorce, if applicable
- Any other documentation that supports your request for review

Student's Name	ECC ID#

2014-2015 PERSONAL STATEMENT OF EXPLANATION Dependent Student

Please explain, in detail, your special circumstances and why you are requesting a financial Aid Advisor to change your and/or your parents' 2014-2015 FAFSA income information. Incomplete explanations may cause delay or denial of your request. (If you need additional space, continue on the back of this form).

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Student's Name	ECC ID#	

2014-2015 STATEMENT OF INFORMATION Dependent Student

Complete all questions in <u>applicable sections only</u>. If your or your parents' income information did not change leave that section blank.

S	TUDENT'S SECTION	
1.	Did you voluntarily quit or reduce your hours at work?	\square YES \square NO
	If YES, please explain why:	
	When did you quit or reduce your hours? (month/year)	
	If you are still working, how many hours per week?	
2.	Were you laid-off or terminated from your job?	\square YES \square NO
	If YES, when were you were laid-off or terminated? (month/year)	
3.	Do you receive child support?	\square YES \square NO
4.	Have Unemployment Benefits been applied for?	\square YES \square NO
	If YES, when will (did) the Unemployment Benefits start? (month/year)	
P	ARENTS' SECTION	
1.	Did either of your parents voluntarily quit or reduce their hours at work?	\square YES \square NO
	If YES, please explain why:	_
	When did she/he quit or reduce their hours? (month/year)	\square YES \square NO
	If she/he is still working, how many hours per week?	
2.	Were they laid-off or terminated from their job?	\square YES \square NO
	If YES, when were they laid-off or terminated? (month/year)	
3.	Are your parents married?	\square YES \square NO
	If NO, give date of separation or divorce, (month/year)	
1.	Does your parent receive child support?	\square YES \square NO
5.	Have you applied for Unemployment Benefits? If YES, when will (did) the Unemployment Benefits start? (month/year)	☐ YES ☐ NO
CERTIFICATION: I certify that all information reported on this form is true, complete, and accurate to the best of my knowledge. I agree to provide proof of the information that I have reported on this form. False statements or misrepresentation will be cause for denial, reduction, withdrawal, and/or repayment of financial aid. I give permission to the Financial Aid Office to make corrections/adjustments to data on my FAFSA based on forms and/or documents submitted. I understand that I must report changes of the above figures to the Financial Aid Office.		

Date

Parent's Signature

Date

Student's Signature

Student's Name	ECC ID#

2014-2015 PROJECTED AWARD YEAR INCOME STATEMENT Dependent Student

Do not leave any section blank. If any part of this form is left blank it will not be accepted. If your parents list "0" income for any month, provide an explanation on the back of this form or a separate sheet of how their expenses listed on the Statement of Projected Basic Living Expenses form will be paid. Failure to include this explanation may cause delay or denial of your request. LIST GROSS INCOME FIGURES. **Gross income** is earnings before taxes and other deductions are subtracted.

- * **Taxable income** is any income that is reported to the IRS. Unemployment Benefits are taxable income.
- ** Untaxed income includes earnings from work paid by cash or check <u>not</u> being reported to the IRS, child support, TANF/CalWorks, General Relief, Social Security (or any other retirement benefits), and cash received from friends or relatives used to pay living expenses.

Mother/Stepmother's 2014-2015 Projected Income			
	GROSS Taxable*	Untaxed**	Source of Income
July 2014			
Aug. 2014			
Sept. 2014			
Oct. 2014			
Nov. 2014			
Dec. 2014			
Jan. 2015			
Feb. 2015			
March 2015			
April 2015			
May 2015			
June 2015			
Income Totals			

Father/Stepfather's			
2014-2015 Projected Income			
	GROSS Taxable*	Untaxed**	Source of Income
July 2014			
Aug. 2014			
Sept. 2014			
Oct. 2014			
Nov. 2014			
Dec. 2014			
Jan. 2015			
Feb. 2015			
March 2015			
April 2015			
May 2015			
June 2015			
Income Totals			

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Student's Signature Da	ate Pare	rent's Signature I	Date
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Student's Name	ECC ID#

2014-2015 PROJECTED AWARD YEAR INCOME STATEMENT Dependent Student

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Student's 2014-2015 Projected Income					
	GROSS Taxable*	Untaxed**	Source of Income		
July 2014					
Aug. 2014					
Sept. 2014					
Oct. 2014					
Nov. 2014					
Dec. 2014					
Jan. 2015					
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April 2015					
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Student's Nai	me	ECC ID#	
Student's Sign	nature Date	Parent's Signature	Date
	PARENTS' STATEMENT OF PROJEC July 2014 - Ju		ENSES
July 1, 2014 Do not incl	FIONS: Have your parents complete the information 4 and June 30, 2015. If amounts differed from month lude any expenses covered by food stamps or housi put a "0". Do not leave any question blank.	to month, provide an average for t	he 12-month period
		Amount p (Do not leave an	oer MONTH y amount blank)
1. Re	ent or Mortgage (include principal, interest and taxes)	\$	
2. Ut	tilities (gas, electric, water, telephone, cell phone etc.)	\$	
3. Fo	ood (at home and away from home)	\$	
4. Ca	ar Payment(s)	\$	
5. Tr	ransportation (gas, oil, repairs and/or maintenance, bus p	asses) \$	
6. El	ementary/Secondary Tuition or Child Care Paid		
7. Ca	ar Insurance expenses	\$	
8. M	edical/dental expenses paid but NOT covered by insurar	ce \$	
9. Cl	nild Support Paid (due to divorce or separation)	\$	
10. Ex	spenses for clothing, entertainment, gifts & travel	\$	
11. Ot	ther Expenses:	\$	
•	our parents receive Food Stamps/SNAP? our parents receive housing subsidies?	☐ YES ☐ NO ☐ YES ☐ NO	
CERTIFICA knowledge. misrepreser	TION: I certify that all information reported on this f I agree to provide proof of the information that station will be cause for denial, reduction, withdrawal, al Aid Office to make corrections/adjustments to dat	orm is true, complete, and accurate have reported on this form. For and/or repayment of financial aid.	False statements of alse statements of the statement of the state
Student's Sign	nature Date	Parent's Signature	Date
	FOR FINANCIAL AID OF	ICE USE <u>ONLY</u>	
Total Mon	thly Expenses Total Annual Expenses (12 m	0.)	
Total Stud	ent's Income Total Parent's Income		

Total All income _____