

**RETURN TO:**

Mt. San Antonio College
Financial Aid Office
1100 N. Grand Ave
Walnut, CA 91789

Student's Name: _____

Mt. SAC ID#: _____ Date: _____

2017-2018 PARENT(S) CHANGE IN INCOME FORM

You may qualify for additional funding if your parent(s) had a reduction in income. Not all income reductions will result in an increase in the amount of your award. To have your eligibility re-evaluated, please have your parents complete both sections A and B. All supporting documentation requested must be attached to this form to continue processing.

Important note: For income adjustments on and after January 1, 2018, you will be required to submit copies of your 2017 Federal Tax Return Transcripts and W-2's. Form must be completed in blue or black ink.

DO NOT MAIL THIS FORM OR SUBMIT TO THE FINANCIAL AID OFFICE UNTIL YOU HAVE SEEN THE FINANCIAL AID SPECIALIST ON DUTY. A SPECIALIST IS AVAILABLE MONDAY – THURSDAY, 8:00 AM - 6:30 PM, AND FRIDAY, 8:00 AM – 4:00PM.

SECTION A: THERE HAS BEEN A REDUCTION IN INCOME DUE TO THE FOLLOWING REASON(S)☐ Loss of job for parent(s)

- **ATTACH** all of the following:
- Letter from employer showing the last date worked
 - Most recent pay stub showing year-to-date earnings
 - Unemployment benefit letter (EDD)
 - 2015 Federal Tax Return Transcript
 - 2015 W-2's
 - 2016 Federal Tax Return Transcript
 - 2016 W-2's

☐ Divorce

Date of Action: _____

☐ Separation

- **ATTACH** all of the following:
- Supporting documentation (e.g. divorce papers, utility bill showing separate address [no cell phone bill], legal separation papers, etc.)
 - 2015 Federal Tax Return Transcript
 - 2015 W-2's
 - 2016 Federal Tax Return Transcript
 - 2016 W-2's

☐ Loss of Parent

Date of Loss: _____

- **ATTACH** all of the following:
- Supporting documentation (e.g. death certificate)
 - 2015 Federal Tax Return Transcript
 - 2015 W-2's
 - 2016 Federal Tax Return Transcript
 - 2016 W-2's

☐ Loss of Benefits

- **ATTACH** all of the following:
- Letter from agency with date of termination and total paid in 2015
 - 2015 Federal Tax Return Transcript
 - 2015 W-2's
 - 2016 Federal Tax Return Transcript
 - 2016 W-2's

Which Benefit (e.g. Social Security, TANF, etc.): _____

☐ Reduction of work hours

- **ATTACH** all of the following:
- Most recent pay stub showing year-to-date earning
 - 2015 Federal Tax Return Transcript
 - 2015 W-2's
 - 2016 Federal Tax Return Transcript
 - 2016 W-2's

Date reduction occurred: _____ Hourly pay rate: \$ _____ Hours worked per week: _____

☐ Other➤ **ATTACH** all of the following:

- Appropriate documentation which show dollar amount received
- 2015 Federal Tax Return Transcript
- 2015 W-2's
- 2016 Federal Tax Return Transcript
- 2016 W-2's

Please explain: _____

SECTION B: PROJECTED INCOME AND RESOURCES**DO NOT LEAVE BLANKS. Put Zero (0) if the answer is zero.**

\$ _____ Father's earnings from January 1, 2017 to December 31, 2017.

\$ _____ Mother's earnings from January 1, 2017 to December 31, 2017.

\$ _____ Unemployment benefits: **ATTACH** a copy of eligibility letter **even if no benefits were granted**.\$ _____ Other taxable income (e.g. spousal support, survivor benefits, pension, etc.). Specify type below and **ATTACH** appropriate documentation. **List the type of other taxable income:** _____

\$ _____ Benefits: (e.g. Social Security, TANF, Worker's Comp, Disability) ATTACH copy(s) of eligibility payments.

\$ _____ Other untaxed income: (e.g. child support, rental income, etc.). Specify below and **ATTACH** appropriate documentation. **List the type of untaxed income:** _____

SECTION C: REVIEW AND SIGN

At least one parent must sign this form. By signing this worksheet, you certify that all information reported on this worksheet is complete and correct. If you purposely give false or misleading information, you may be fined, sentenced to jail, or both.

Parent's Signature_____
Date_____
Student's Signature_____
Date**For Office Use Only**☐ Approved☐ Denied**Additional comments are posted on RHACOMM in Banner.*_____
FA Specialist Certification_____
Date