## WALLACE STATE HANCEVILLE · ONEONTA

Section 1: To be completed by student (please print):

## 2024-2025 Requirements for Consideration of Income Reduction

Student's Name	Social Security Num	ıber
Phone Number	Email Address	
circumstances when determining eligible situations such as loss of employment, illness. Students must submit a compronsidered for special circumstances. manner. Requests should be received after that point will be processed as your situation. All documents for the picture to make an adjustment. By substudent's financial situation for the curdocuments does not automatically qual all the documents required to make the Section 2: Please complete the folloquestions blank or skip questions.  **Students may not request an incomplete the student must have a financial situation for the curdocuments required to make the section 2: Please complete the folloquestions blank or skip questions.	owing to better describe your financial owing to better describe your financial owner eduction simply because 2023 incomitigating circumstance that caused that have for at least 12 consecutive weeks:	d office will consider in income or catastrophic llowing documents to be requests in a timely er. Requests submitted formation that applies to required to get an accurate aid office will estimate the Submission of these responsibility to upload al situation. Do not leave
Did you receive unemployment compe	ensation?Amount: _	
Must provide a copy of unemploymen	t information.	
Loss of employment or layoff?provide documentation for last payments	nt date and termination date.	Must

Change in employment with lesser paying jobs? provide information or last cumulative check stub.	Must
B: Other unusual circumstance for special configuration of the conditions noted above for resplease explain in detail and fully document the unusual circumstant changes in financial status must be documented.	evaluation of your financial aid eligibility,
Divorce or Separation (Must provide documentation of	f pending divorce or separation)
Death (Must provide death certificate)	
Catastrophic Medical Condition (Copies of cancelled medical bills for catastrophic illness. May also use summary related to catastrophic illness. We can only adjust what was a out of pocket expense.)	from pharmacy on cash paid for medicine
Natural Disaster (Fire or Tornado loss) (Copies of can paid for replacing items that were not covered by insurance. by the student/parent/spouse out of pocket expense.)	•

ALL STUDENTS: This information must be provided for ALL members of the household not just the person that had the change. Dependent students must report both parents if parents are still married to each other.

Students applying for an income reduction for the Spring 2025 or Summer 2025 term after November 1, 2024 will be required to complete their 2024 federal taxes and order a return transcript (order at <a href="www.irs.gov">www.irs.gov</a>) for the reduction.

## **Section 3: Personal Statement:**

After checking the previous criteria, please continue by detailing in writing your unusual or special circumstances. Be sure to include all relevant information. Your written explanation should be as detailed as possible. All personal statements should be signed, dated and uploaded with this form along with the other items listed at the bottom of this page.

## **CERTIFICATION STATEMENT**

(Please read carefully before signing)

All relevant or requested information and/or documentation must be attached to your request for a reevaluation of your eligibility for financial aid. Incomplete requests will not be reviewed. Requests are processed in a timely manner through the Financial Aid Office depending upon when they are submitted.

By signing below, I affirm that all information contained in or attached to this request for a re-evaluation of my financial aid eligibility, including any attached personal statement and/or documentation, is true

and correct to the best of my knowledge. I	affirm that I have not knowingly or intentionally provided
any false statements or fraudulent document	ntation. I understand that if I am found to have given false or
fraudulent statements and/or documentatio	n, this request will be denied and any eligibility for federal
and state student aid may be suspended or	cancelled.
Student's Signature	Date

Student & Signature	Dute	
Parent or Spouse Signature	Date	
	1	
A complete packet for Consideration of Income Rec	duction consists of:	
Completed and signed Income Reduction Fo	orm	
2022 and 2023 federal tax transcripts and W2's for student/parent/spouse		
Personal Statement noting extenuating circu	ımstances	
All documentation to support your request		

Upload your completed form and all supporting documentation using the Professional Judgement link provided on your MyWallaceState. You may also drop off your completed packet at the Lion Central desk on the Hanceville campus or at the Oneonta campus.

The Free Application for Federal Student Aid (FAFSA) is the only form that a student is required to complete to be considered for student assistance from any of the Title IV, HEA programs. No additional application or other request for information can be required by an institution in support of the student's request for Title IV, HEA program assistance, except for information needed to ensure the student's eligibility for such assistance (e.g., information needed to complete verification or to demonstrate compliance with the student eligibility provisions of the HEA and the regulations).

No student shall be discriminated against on the basis of any impermissible criterion or characteristic including, but not limited to, race, color, national origin, religion, marital status, disability, gender, age, or any other protected class as defined by federal and state law. Institutions must publish their policies regarding nondiscrimination.