



- Fall 2023 - 12/01/2023
Spring 2024 - 05/10/2024
Summer 2024 - 07/26/2024

Student Name _____

Student ID _____

Please complete this form if, due to circumstances beyond your control, you and/or your spouse or parent(s) [for dependent students] have had some dramatic financial change that has reduced your income in 2022 or 2023.

- If you are considered an independent student you will only provide information about yourself and/or your spouse.
If you are considered a dependent student you will provide information about yourself, and/or your parents.

SECTION 1: Mark the reason/s that applies to your income reduction situation and include the dates the situation happened.

NOTE: You must attach documentations for all marked reasons.

Month and Year

- 1. Unemployment or change in employment
2. Loss of income (i.e. TANF, social security)
3. Divorce/Separation
4. Death of
5. Disability of
6. Other (explain)

SECTION 2: Please provide a detailed written statement on a separate sheet of paper, to explain the circumstances that contributed to the situation. If you had one-time income (i.e., inheritance, IRA or pension distribution) during 2022 that you will no longer have in 2023 and/or 2024, identify the source of income and explain how funds were spent or invested.

INCOME REDUCTION REQUEST CHECKLIST: Please mark all that applies.

- Written Statement (required for all income reduction requests. Please explain in detail with date(s) and year(s) of the circumstance(s) that lead to the income reduction) (required)
Income Reduction Request Form (required)
Verification Worksheet (Dependent or Independent) (required)
2023 IRS Tax return Transcripts including all schedules and W-2s (required for both parent and/or student if required to file)
2024 IRS Tax Return Transcripts including all schedules and W-2s (required after 12/01/2024 for both parents and/or student if required to file)
Copy of your Unemployment Benefits (i.e. eligibility award letter) from the Employment Development Department (EDD)
Letter(s) from former employer(s) indicating last working day, reason for separation and final pay stubs. For Military Discharge within 2023, 2024, or 2025, DD214 showing discharge status.
Finalized Divorce decree or Legal Separation decree (court document) - or - Proof of Separate Dwelling for both parties if there is no "legal separation court document" (i.e. separate rental agreements)
For all jobs that you are still currently employed: an employment letter indicating the gross year-to-date earnings, current rate of pay, and average number of hours worked per week.

- Proof of current year-to-date untaxed income (including Worker's Compensation, cash received from family, friends, and/or inheritance)
- Any other source of income for 2023 or 2024 including, but not limited to:
 - LES showing subsistence benefits/Chapter 31 Benefits
 - VA work-study paystubs

NOTE: You must provide all required documentations before an assessment of your petition can be made. Incomplete forms will not be accepted & unsubstantiated forms will be dismissed.

SECTION 3: **Circle the one 2023 or 2024 (First day to apply for Income Reduction based on 2023 is 10/03/2024)**

- Complete the information below with your 2022 taxable and un-taxable income. (*Write \$0 for the items that do not apply*)
- **or** -
- Complete the information below and provide documentation for all 2024 Taxable and Un-taxable Income earned/received to date, as well as all **Expected and/or Projected** Taxable and Un-taxable Income for the remainder of 2024.
 - **Submission after 12/01/2024 will required a copy of your 2024 IRS Tax Return Transcript *if* required to file.**

Taxable Income Sources	Student	Spouse	Parent 1	Parent 2
Wages, Salaries & tips				
State Unemployment Benefits (EDD)				
Pensions or Annuities Distribution				
Alimony Received				
Cashed IRAs, 401ks or Stock Bonds Owned				
Other Taxable Income (specify)				
Total 202__ Taxable Income	\$	\$	\$	\$
Un-Taxable Income Sources	Student	Spouse	Parent 1	Parent 2
Social Security Benefits				
Temporary Assistance for Needy Family				
Child Support Received				
Disability Payments				
Other Untaxed Income and /or Benefits				
Total 202__ Untaxed Income	\$	\$	\$	\$
TOTAL 202__ INCOME	\$	\$	\$	\$

Section 4: Certification.

I certify that the information provided on this form is true and correct. I understand that this information will be used to determine my eligibility for financial aid and that false or misleading information may be cause for termination of my financial aid and repayment of funds received.

Student Signature _____ Date _____

Parent Signature _____ Date _____

Must be one of the parents listed on FAFSA, required for dependent students.

This request is valid only at San Diego City College. The decision of the Financial Aid Office is *Final*. It is possible that the Department of Education may select your FAFSA for further verification resulting in additional documentation needed after this form is processed.

Financial Aid Technician Notes: _____