



**ALLAN
HANCOCK
COLLEGE**
Financial Aid Office
800 South College Drive
Santa Maria, CA 93454-6399
(805) 922-6966, Ext. 3200

NAME _____

PHONE # _____

STUDENT ID # **H** _____

2023-24 PROJECTED-YEAR INCOME APPEAL (STUDENT)

Please supply all requested information and documentation including your 2021 signed IRS tax return or tax return transcripts, unless they were previously submitted during the verification process or you utilized the Data Retrieval Tool when completing your FAFSA. Income appeals must be received by the financial aid office no later than May 3, 2024.

Income Appeals are allowed to increase a student's eligibility for financial aid based upon changes in the student's income and resources since the 2021 base year. We can utilize the 12-month period that maximizes a student's eligibility for financial aid, but the time period cannot be before the base year and cannot extend beyond the end of the academic year (June 30, 2024). Please check below which 12-month period you would like the financial aid office to use to calculate your financial aid eligibility (only choose one):

- The 2022 tax year (January 1, 2022 – December 31, 2022) Provide your signed 2022 tax return
- The 2023 tax year (January 1, 2023 – December 31, 2023) Provide your signed 2023 tax return if available
- The current academic year (July 1, 2023 – June 30, 2024) Not available to use until 1/1/2024

1. Indicate the person(s) whose **TOTAL INCOME and BENEFITS** from all sources for the period indicated above, was/will be **LESS** than the total amount received in 2021:

- STUDENT and/or SPOUSE of student

My/our total income and/or benefits have been, or will be, reduced in because: _____

ATTACH DOCUMENTATION to show why and when income and/or benefits mentioned above were reduced or terminated (e.g., letter from employer, termination or layoff letter, benefits letter from appropriate agency, etc.).

2. Report all **BENEFITS, EARNINGS** and **OTHER INCOME** (INCLUDING spouse's) for all of the period indicated above.

List each employer, and each source of support, benefits, or other income for the period indicated above (A and B below)	Student (S) or Spouse (SP) (Circle one)	Amount received (to date) since Beginning of period indicated above (A)	Estimate Additional Amount to be received from today through the end of the period indicated above (B)	Total
	S/SP	\$	\$	\$
	S/SP	\$	\$	\$
	S/SP	\$	\$	\$
	S/SP	\$	\$	\$

A. Include income from unemployment insurance, law suits, legal settlements, sales of assets, pensions, annuities, severance packages, death benefits, life insurance, state disability, child support, spousal support, alimony, withdrawals from retirement accounts, Workers Compensation, and any other source of support or income including BAH and parsonage.

B. If you chose the current academic year above, ESTIMATE your (and your spouse's) earnings, benefits, and all other income expected to be received through June 30, 2024. For each item show your calculations on an attached sheet.

3. Attach **REQUIRED DOCUMENTATION**: Attach a signed copy of your 2021 IRS tax return or tax return transcript (including W-2 forms) unless previously submitted and documentation for each item listed above in Section 2 (e.g., final or most recent paystub, agency benefits form, divorce decree, account statements, etc.). If student and/or spouse has earnings from a business then a signed copy of the 2021 federal tax return or tax return transcript is required.

I/we hereby certify that all information reported on this form and any attachments are true, accurate, full and complete. I/we understand that false statements, misrepresentations, and deliberate omissions may be cause for criminal prosecution; repayment of financial aid; and/or denial, reduction, or withdrawal of eligibility. I/we understand that the student's eligibility for next year, 2024-25, may be affected if this estimate of earnings, benefits or other income is not accurate. Signatures are required of all persons reporting income above.

Student's Signature

Date

Spouse's Signature

Date

FA Office Use Only:				
Approved	Denied	Analyst's Signature	Date	PJ EFC

2023-24 PROJECTED YEAR INCOME APPEAL (STUDENT)

Please **READ THESE INSTRUCTIONS** before completing the reverse side of this form

WHY use this appeal form?

It is possible, but not guaranteed, that the student's eligibility for financial aid will increase if the student and/or the spouse will experience a significant reduction of income in calendar year 2023 (or other 12-month period) as compared with their 2021 income.

- ◆ **IMPORTANT:** If the student is **MARRIED**, there must be a reduction in the **COMBINED TOTAL INCOME** from all sources for the student and their spouse for the 12-month period chosen.

For example: If the student becomes unemployed, but the spouse's earnings increase such that their total income from all sources (not just their taxable income) will actually be more than their total was for 2021, **DO NOT FILE THIS APPEAL**.

- ◆ **IMPORTANT:** **DO NOT FILE THIS APPEAL** if you were already awarded a maximum Pell Grant (\$7,395) for 2023-24. You have already established maximum financial aid eligibility.

WHO may complete this appeal form?

ONLY the student and spouse (if applicable) may use this form. A separate form is available for the parent(s) of a dependent student.

WHEN will this appeal be processed?

There is no prescribed "turnaround" time for the processing of appeals. Appeals will be reviewed on a first-come; first serve basis. However, the financial aid office is working diligently during these difficult times to get students the most assistance available to them as quickly as possible.