

**2011-2012 PARENT
REVISION REQUEST**

**11-12
PARENT
Revision
Request**

*****FOR DEPENDENT STUDENTS ONLY***
DUE TO DECREASE IN RESOURCES OF PARENT OR STEPPARENT**

Section A: Student Information (please print)

Name _____ SSN# _____ - _____ - _____

Address: _____ SID# _____ - _____ - _____

City: _____ State: _____ Zip _____ Telephone # _____

I certify that all information provided on this form is true and complete to the best of my knowledge. If an adjustment is granted based on estimated income, I agree to report any increase in that income to the Financial Aid office.

Student Signature _____ Date _____

Instructions: The remainder of this worksheet should be completed and signed by the parent. We may be able to use the parents projected resources for the 2011 tax year instead of the actual resources from the 2010 tax year to determine the parent contribution. **Documentation is needed to process requests for expenses.**

Read and fill out each section carefully to prevent errors. Complete **ALL** sections. **Steps: 1)** In **Section B**, indicate the type of change. **2)** In **Section C**, check all appropriate boxes. No amounts are required. **3)** In **Section D**, complete **BOTH columns** of the Worksheet. Use whole dollar amounts, no cents. If parent is currently married and not separated, provide **BOTH** parents income information. **Where the question does not apply or the answer is "none", enter zero.** Leaving blanks may delay the processing of your request.

Section B: TYPE OF CHANGE (please check and complete all appropriate selections)

PERMANENT CHANGE IN PARENTS MARITAL STATUS (Complete:

Date of status change: _____ **Type of status change:** ___ widowed ___ separated ___ divorced

If this **permanent** change has occurred since the FAFSA was filled out, we may be able to recalculate using the information for only one parent. For divorced or separated parents, report information for the parent the student lived with the most during the last 12 months. If this is equal, provide information for the parent who provided the most financial support to the student in the last calendar year that the student was supported by a parent. NOTE: If parent married after filling out the FAFSA, you do not have to report it this year unless you are reporting other changes. If you are reporting changes, parent's and stepparent's information must be reported here and on future financial aid applications.

DECREASE IN PARENT/STEPPARENT EARNED INCOME

Date of income change: _____ **Name of parent with income change:** _____

Income change is due to: ___ Loss of Job ___ Reduction in hours ___ Change of Job ___ Retired

Receiving Unemployment Benefits ___ NO ___ YES (*report GROSS amounts in Section D, Category 1*)

INCREASE IN PARENT/STEPPARENT EXPENSES (*report in Section D, Category 3, attach documentation*)

OTHER PARENT CIRCUMSTANCES: Parents should attach a separate signed letter explaining how their ability to contribute has been affected. We will notify you if we need additional information.

PARENT MUST COMPLETE SECTION C & D ON THE OTHER SIDE OF THE FORM

For Office Use Only: ___ Approve ___ Deny Initials: _____ Process date: _____

___ Professional Judgment used ___ Projected income better reflects circumstances

___ expenses affect ability to contribute ___ other: _____

For Office Use Only

Prior TR/EFC _____/_____

New TR/EFC _____/_____

PARENT MUST COMPLETE SECTION C & D

Section C: NON-TAXABLE INCOME/ASSISTANCE (REQUIRED section - if none apply, check last option)**

Someone in our household is now receiving and will continue receiving one or more of the following to pay for living expenses (rent, utilities, food, transportation, etc.) during 2011. (check all appropriate items):

<input type="checkbox"/> DSHS/Welfare	<input type="checkbox"/> Food Stamps	<input type="checkbox"/> Subsidized Housing	<input type="checkbox"/> Supplemental Security Income
<input type="checkbox"/> Social Security	<input type="checkbox"/> Disability	<input type="checkbox"/> L & I	<input type="checkbox"/> Other State or Federal Assistance _____

During the 2011-2012 school year, **PARENT[S]** will be attending college and receiving Financial Aid (loans, grants, work study, and/or scholarships) which will be used to pay for living expenses. **Name of parent[s] attending college** _____ **List college[s] parent is attending/receiving aid:** _____

At this time, there is no person in our house receiving, nor expecting to receive, any of the above listed items in 2011.

Section D: INCOME FIGURES Attach copies of supporting documents (example: YTD pay stubs, Unemployment stubs, SS/L&I benefit letters). Please address all items, both categories. Where the answer is "none", enter "0".

<i>Instructions: Complete BOTH columns.</i> Use whole dollar amounts, no cents. Note: "Yesterday" & "Today's date" will depend on date you fill out the form.	January, 2011 through Today ACTUAL Totals:	Tomorrow through December 30, 2011 ESTIMATED Totals:
Category 1 - Taxable Income:		
Father's gross income from work : (Do not include work-study.)	\$	\$
Mother's gross income from work : (Do not include work study.)	\$	\$
*** Unemployment Benefits - Father	\$	\$
*** Unemployment Benefits - Mother	\$	\$
Other taxable income – total for parents: (interest, dividends, rental income, alimony, capital gains etc.)	\$	\$
Category 2 - Non-taxable Income:		
Non-Taxable Income/Assistance from Section C (no amts, just check box)	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
Child support received :	\$	\$
All other untaxed income and benefits NOT listed in Section C: (DVR, Veterans non-education benefits, etc.)	\$	\$
OFFICE USE ONLY: SubTotal		\$
Category 3 - Expenses:		
Child support paid for children not in the household	\$	\$
Medical and/or dental expenses not paid by insurance:	\$	\$
Parent's OWN College Expenses NOT covered by financial aid	\$	\$
K-12 tuition paid for your Dependent children listed below* (do NOT incl. applicant)	\$	\$
OFFICE USE ONLY: SubTotal		\$
OFFICE USE ONLY:		
	\$	\$
OFFICE USE ONLY: SubTotal		\$
*Category 3 additional info: List children, age, schools attended:	OFFICE USE ONLY: Total	\$
Name:	Age:	School:
<p>THE PARENT REPORTING THE CHANGE OF PARENTAL INFORMATION MUST CONFIRM THIS STATEMENT BY SIGNING BELOW: I certify that all information provided on this form is true and complete to the best of my knowledge. If an adjustment is granted based on estimated income, I agree to report any increase in that income to the Office of Student Financial Aid.</p>		

Parent/Stepparent Signature _____	Date _____
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