

**2011-2012 STUDENT  
REVISION REQUEST**

**DUE TO DECREASE IN RESOURCES OF STUDENT OR SPOUSE**

**11-12  
STUDENT  
Revision  
Request**

**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:** We may be able to use your projected resources for the 2011/2012 school year (07/01/11-06/30/12) instead of the actual resources from the 2010 tax year to determine your family contribution. Read and fill out each section carefully to prevent errors. Complete **ALL** sections. Forms not complete will be returned to you for full completion.

\*\*\*Please note that this form is **NOT** used for requesting additional student expense consideration. That form is titled "Additional Expense Request for Students". If you are a Dependent student and wish to report changes in your **parent** circumstances, please have them fill out the **PARENT** Revision Request form.\*\*\*

**RETURN FORM TO:** Financial Aid Office 1300 Fifth Street – Wenatchi Hall Wenatchee, WA 98801 Fax: 509-682-6811  
Questions? Phone: 509-682-6810 Email: [financialaid@wvc.edu](mailto:financialaid@wvc.edu)

**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 you are currently married and not separated, provide BOTH your and your spouse's 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 STUDENT MARITAL STATUS**

Date of status change: \_\_\_\_\_ Type of change: \_\_\_ widowed \_\_\_ separated \_\_\_ divorced

Name of Spouse: \_\_\_\_\_ Spouse SS# \_\_\_\_\_ - \_\_\_\_\_ - \_\_\_\_\_

Spouse is a WVC student  Yes  No

If this **permanent** change has occurred since the FAFSA was filled out, we may be able to recalculate using just your information, and excluding your spouse's information. NOTE: If you got married after initially filling out the FAFSA, you cannot add your spouse and any dependents this year, and the marriage will not change your initial dependency status.

**DECREASE IN STUDENT AND/OR SPOUSE EARNED INCOME**

Date of income change: \_\_\_\_\_ Decrease is for Student Spouse \_\_\_

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)

**OTHER CIRCUMSTANCES:** Attach a separate signed letter explaining how your ability to contribute has been affected. We will notify you if we need additional information.

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

**MUST COMPLETE SECTION C & D**

**Section C: NON-TAXABLE INCOME/ASSISTANCE** (\*\*REQUIRED section - if none apply, check last option)  
 Count Student, spouse and dependents only in household.

My household (student/spouse/dependents only) is currently 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, my  **SPOUSE**  **CHILD** 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 spouse/child attending college** \_\_\_\_\_ **College 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** Please address all items, both categories. Where the answer is "none", enter "0".  
 Leaving blanks may delay processing of your request, as we will return it to you for full completion. Attach copies of supporting documents (example: YTD pay stubs, Unemployment stubs, SSI/L&I benefit letters).

<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.	<b>July 1, 2011 through Today ACTUAL Totals:</b>	<b>Tomorrow through June 30, 2012 ESTIMATED Totals:</b>
<b>Category 1 - Taxable Income:</b>		
Student's gross income from <b>work</b> : (Do not include work-study.)	\$	\$
Spouse's gross income from <b>work</b> : (Do not include work study.)	\$	\$
***Unemployment Benefits - Student	\$	\$
***Unemployment Benefits - Spouse	\$	\$
Other taxable income – total for student/spouse: (interest, dividends, rental income, alimony, capital gains etc.)	\$	\$
<b>Category 2 - Non-taxable Income: (List both you and your spouse's)</b>		
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 <b>received</b> :	\$	\$
All other untaxed income and benefits <b>NOT</b> listed in Section C: (DVR, Veterans non-education benefits, etc.)	\$	\$
<b>OFFICE USE ONLY: SubTotal</b>		\$
<b>OFFICE USE ONLY:</b>		
	\$	\$
	\$	\$
<b>OFFICE USE ONLY: SubTotal</b>		\$
<b>OFFICE USE ONLY: Total</b>		\$

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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 ____/____
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