

Fall 2019 –  
Summer 2020  
Income Reduction  
Form



Student Financial Aid Office  
11400 Robinwood Drive  
Hagerstown, MD 21742

Phone: 240-500-2473  
finaid@hagerstowncc.edu  
FAX: 301-791-9165

**WARNING:** If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

**Do not submit this form unless you have already filed a 2019-2020 Free Application for Federal Student Aid (FAFSA) and received a copy of your results.** Financial need is usually based on annual income from prior-prior tax year data (2017). If your income has recently decreased or you have special financial issues that were not taken into account on your FAFSA, we may be able to reevaluate your financial and/or income information using the 2018 tax year or another 12 month time period that better reflects your financial circumstances.

A professional judgment (PJ) adjustment may be warranted if a family member experienced a significant change of income, either upward or downward. For example: for an individual who has lost a job or has taken a significant salary cut beginning in December of 2017, the Student Financial Aid Administrator (SFAA) may use the income for the 12-month period following the reduction in income (January 2018 through December 2018) instead of the prior-prior year income (calendar 2017) that was initially used in the EFC calculation. Alternatively, the SFAA may choose to use more recent income that more accurately reflects the family's current financial circumstances.

A SFAA may use PJ on a case-by-case basis only to adjust the student's cost of attendance or the data used to calculate a student's EFC. This adjustment is valid only at the school making it. The reason for the adjustment must be documented (by a third party if possible), and it must relate to the special circumstances that differentiate the student from other students—not to conditions that exist for a whole class of students. The law gives some examples of special circumstances, such as elementary or secondary school tuition, medical or dental or nursing home expenses not covered by insurance, unusually high child care costs, being homeless or a dislocated worker, recent unemployment of a family member, or other changes in the family's income or assets.

**We cannot make adjustments for any of the following circumstances:**

- Vacation expenses
- Tithing expenses
- Standard living expenses like utilities, mortgage or rent
- Credit card expenses
- Children's allowances
- Post-enrollment activity expenses

***Please DO NOT MAKE CHANGES TO YOUR SAR / FAFSA. Once we have reviewed your request we will make all the appropriate corrections.***

**Required Documents: Please read carefully. Check off all included information requested below.**

**ALL APPEALS MUST INCLUDE:**

- Proof of qualifying event: Examples include: unemployment benefits statement, retirement or termination notice, memo/letter from employer regarding change or reduction in employment, physician's disability statement, lawyer's statement regarding separations, court statements regarding divorce, termination of child support, social security benefit termination notice, death certificate, or obituary notice.
- Completed 2019-20 Income Reduction Form.
- Typed explanation of the income-lowering event, including exact dates of the event.
- Completed 2019-2020 Verification Worksheet. Please complete and print this separate form from our Forms Page.
- Copy of the student and spouse's (if applicable) 2017 OFFICIAL Federal IRS Tax Return Transcript or 2017 Signed IRS Tax Returns. This can be ordered from <https://irs.gov>.
- Copy of the parent's (for dependent students – not required for independent students) 2017 OFFICIAL Federal IRS Tax Return Transcript or 2017 Signed IRS Tax Returns. This can be ordered from <https://irs.gov>.
- Completed 2019-2020 Asset Worksheet. Please complete and print this separate form from our Forms page.
- Copy of all the student's and spouse's (if applicable) 2017 W2's.
- Copy of all the parents' (if applicable) 2017 W2's.
- A signed copy of the student and spouse (if applicable) **2018** tax forms (1040, 1040A, or 1040EZ) and all W2's.
- A signed copy of parents ((for dependent students – not required for independent students) **2018** tax forms (1040, 1040A, or 1040EZ) and all W2's.
- Final income statements (paycheck stubs) from **all** 2019 employers (if no longer employed)
- Two current pay stubs or earnings statements from **all** current 2019 employers, for student, spouse, and/or parents as applicable.
- Two current statements from all non-W-2 related 2019 income (i.e. taxable Social Security, Worker's Compensation, Unemployment Compensation, projected business or rental income, etc.), for student, spouse, and/or parents as applicable.

**THIS APPEAL WILL BE CONSIDERED INCOMPLETE AND  
RETURNED TO THE STUDENT IF SUPPORTING DOCUMENTS  
ARE NOT INCLUDED.**

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Name: \_\_\_\_\_

HCC ID#: \_\_\_\_\_ Phone #: \_\_\_\_\_

E-mail: \_\_\_\_\_

**Why is your current income less than your 2017 income?**

Parent	Student/Spouse	
<input type="checkbox"/>	<input type="checkbox"/>	Unemployment, reduced employment, or job change
<input type="checkbox"/>	<input type="checkbox"/>	Disability or natural disaster
<input type="checkbox"/>	<input type="checkbox"/>	Separation or divorce after filing FAFSA
<input type="checkbox"/>	<input type="checkbox"/>	Death of spouse or parent after filing FAFSA
<input type="checkbox"/>	<input type="checkbox"/>	Loss of untaxed income or benefits (social security, child support, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	Received one time non-recurring income (IRA withdrawal, inheritance, etc.)
<input type="checkbox"/>	<input type="checkbox"/>	Other _____

Are you currently employed?  NO  YES - Current employer: \_\_\_\_\_

**Explanation of Income Reduction**

Please provide a typed explanation detailing your situation. **Be sure to include all relevant information, i.e. dates the qualifying event occurred, the individuals it affected, and any other information you feel would justify this request for an income reduction.** Be complete in your written explanation as it determines the outcome of your request. **Your Income Reduction Appeal will not be complete without the typed explanation.**

Only those responsible for the submitted income information should sign below.

***I understand that no changes will be made until I provide all the information requested.***

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent Signature (if applicable)

\_\_\_\_\_  
Date