



# 2023-2024 Income Adjustment Petition for a Dependent Student

PYPR21

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

Last, First, MI

Evergreen ID: \_\_\_\_\_

Address: \_\_\_\_\_

Street, City, State, ZIP

Phone: \_\_\_\_\_

The 2023-2024 Free Application for Federal Student Aid (FAFSA) calculates the Expected Family Contribution (EFC) based on your reported 2021 income, and does not provide an opportunity to share information about changes to your income or circumstances. We can review these circumstances **with supporting documentation**. If this petition is approved, the Financial Aid Office will revise your FAFSA, adjust your EFC, and this MAY result in a change to your financial aid award. Our ability to modify your award will depend on availability of funds and the extent to which your circumstances reduce your EFC. *A review of this petition does not guarantee an approval or adjustment to your financial aid award. Loss of dependent student income will not qualify for an income adjustment.*

**Deadline to submit this petition is May 15, 2024 OR before the end of the last quarter attended.**

## SECTION 1: Please check ALL of the circumstance(s) that apply to you and provide the information and documentation requested.

- ☐ Change in employment: change of employer, reduction in wages or hours, retirement, unemployed, etc. (include name of parent, date of change and attach pay stub, termination of employment letter, unemployment benefit statement, etc.).
- ☐ Disability (attach benefits statement).
- ☐ Loss of wage earner due to death, divorce, or separation (attach copy of death certificate, divorce decree, etc.).
- ☐ Termination of child support or alimony (provide explanation in section 3).
- ☐ 2020 income included a one-time only income (provide explanation in section 3).
- ☐ Other (explain in section 3).

## SECTION 2: Please provide any information that might clarify or support your request. Add another page if necessary.

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### Office of Financial Aid

2700 Evergreen Pkwy NW ▪ Olympia, WA 98505 ▪ phone 360-867-6205 ▪ fax 360-867-6576 ▪ web [www.evergreen.edu/financialaid](http://www.evergreen.edu/financialaid) ▪ email [finaid@evergreen.edu](mailto:finaid@evergreen.edu)

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## SECTION 3:

To fill out this form, please add up what you have received from January 1, 2023 to today and estimate what you will receive through December 31, 2024 before filling out the form. This information is before exemptions, adjustments or deductions that your family expects to receive in 2023. In the case of divorce or separation, include custodial parent information only. Enter annual amounts or \$0, do not leave anything blank or it will be considered incomplete.

January – December 2023 Gross Taxable Income	Parent 1	Parent 2
1. Wages, salaries, tips	\$ _____	\$ _____
2. Severance pay	\$ _____	\$ _____
3. Pensions and annuities	\$ _____	\$ _____
4. Interest and dividend income	\$ _____	\$ _____
5. Business or farm income	\$ _____	\$ _____
6. Capital gains	\$ _____	\$ _____
7. Income received from rents, after expenses paid for	\$ _____	\$ _____
8. Alimony	\$ _____	\$ _____
9. Unemployment Compensation	\$ _____	\$ _____
10. Any other taxed income: _____	\$ _____	\$ _____
<u>Total 2023 Gross Taxable Income</u>	\$ _____	\$ _____

  

January – December 2023 Gross Untaxed Income	Parent 1	Parent 2
1. Payments to tax-deferred pension and savings plans	\$ _____	\$ _____
2. IRA deductions and payments to self-employed SEP, SIMPLE, and Keogh payments	\$ _____	\$ _____
3. Child support received	\$ _____	\$ _____
4. Tax exempt interest income	\$ _____	\$ _____
5. Untaxed portions of pensions or IRA distributions	\$ _____	\$ _____
6. Housing, food and other living allowances paid to members of the military, clergy and others	\$ _____	\$ _____
7. Veterans' non-education benefits, such as Disability, Death or Pension	\$ _____	\$ _____
8. Other untaxed income not reported, such as: _____	\$ _____	\$ _____
<u>Total 2023 Gross Untaxed Income</u>	\$ _____	\$ _____

## SECTION 5:

Will the listed parent(s) pay child support during 2023? ☐ Yes ☐ No

If yes: Number of months: \_\_\_\_\_ Monthly payment: \$ \_\_\_\_\_ Total: \$ \_\_\_\_\_

**I certify that the information on this form is true and complete to the best of my knowledge.**

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Parent's Signature: \_\_\_\_\_ Date: \_\_\_\_\_