



2016-2017 Change of Circumstances - Student

Student Name: _____ Student ID: _____

Please note: Submission of this document does not guarantee a change to your award. You are responsible for any balance due on your student account. If your Expected Family Contribution (EFC) is already zero, do not submit this form.

- 1) **Letter:** Provide a type written statement outlining the change in your financial circumstances (please include dates).
- 2) **Qualifying Circumstances:** Choose the option below that best describes your change of circumstances and provide documentation accordingly.

Qualifying Circumstances	
<input type="checkbox"/> Significant Reduction of income If you became unemployed in 2016, or had a significant decrease to income due to special circumstances, provide the following information.	<p>If your reduction of income was due to a job loss please provide a copy of the following:</p> <ul style="list-style-type: none">▪ Most recent paycheck stub(s) showing year-to-date earnings.▪ Resignation, termination or layoff notification.▪ Letter(s) showing unemployment compensation, disability, and/or any other form of income assistance. <p>If the change was a reduction of income due to a reduction of pay, hours or business, please provide a copy of the following:</p> <ul style="list-style-type: none">▪ Your most recent paycheck stub(s) showing year-to-date earnings.▪ Any communication you have regarding the reduction of income from employer (if applicable).▪ If you are self-employed, please make sure to indicate the reason for the loss of income in your letter. <p>If your reduction of income was due to a loss or reduction of income not related to earned wages or business income please provide any documentation available.</p>
<input type="checkbox"/> Separation/Divorce/Marriage which occurred after the 2016-17 FAFSA application was completed.	<p>If the change is related to a Separation/Divorce, please provide a copy of the following:</p> <ul style="list-style-type: none">▪ Date of separation/divorce_____ (does not have to be legal separation).▪ W2s and/or SCHEDULE C and any other form related to income from the 2015 1040 Tax Return for you and your spouse.▪ Report the amount of Child support you will receive in 2016 (if none, indicate \$0) \$ _____▪ Report the amount of Child Support you will pay out in 2016 (if none, indicate \$0) \$ _____ <p>If the change is related to a marriage, please provide the following:</p> <ol style="list-style-type: none">a) Date of marriage_____b) W2s, SCHEDULE C and/or K1, and any other form related to income from the 2015 1040 Tax Return for you and your spouse.
<input type="checkbox"/> One-Time Income that will not be received again in 2016.	<p>If the change of circumstance is related to a sum of money that was received in 2015 that will not be received again in 2016 (such as an early pension or IRA withdrawal), please provide a copy of the following:</p> <ul style="list-style-type: none">▪ Indicate where and how this one-time income has been allocated.▪ Provide documentation of the source of the funds (eg. 1099 or other early withdrawal paperwork).



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3) **Income Projection:** Provide a projection of what you believe your income and assets will be for the 2016 calendar year.

Income and Asset Projection

ESTIMATED INCOME (including untaxed income) from January 1 – December 31, 2016	Student	Student's Spouse (if married)
Wages	\$	\$
Interest and/or Dividend Income	\$	\$
Rental/Business/Capital Gains Income	\$	\$
Social Security Income	\$	\$
Unemployment Compensation	\$	\$
Housing and/or Living Allowance	\$	\$
Worker's Compensation	\$	\$
Disability Income or Benefits	\$	\$
Rehabilitation Income	\$	\$
Child Support	\$	\$
Other (specify source):	\$	\$
Total Income:	\$	\$

CURRENT ASSETS (Include all current assets as of 2016-17 FAFSA filing)	Student	Student's Spouse (if married)
Cash/Savings	\$	\$
Net Investment Value	\$	\$
Net Business Value	\$	\$
Total Assets:	\$	\$

4) **Submission:** Submit this completed form with all corresponding documentation to our office in-person, via postal mail, fax or email. You will be notified if there are any additional items that are needed. You will also be notified when your request has been reviewed and a decision has been made.

My signature below certifies that all of the information on this form is true and complete to the best of my knowledge. If requested, I agree to provide further documentation to substantiate the information provided. I understand all special circumstances are reviewed on a case-by-case basis and this written request does not guarantee approval and/or may not ultimately result in an actual change to the financial aid already offered.

Student Signature _____ **Date** _____