



**2024-2025 Special Circumstance
SAI Calculation Income Reduction
Request (LEFCRE-#26)**

We strongly recommend that this request be received complete by the Financial Aid Office (FAO) no less than 2 weeks before your last day of class for the term you are enrolled. Requests received or incomplete on your last day of class may not be reviewed. The law does not permit the FAO to process any requests submitted after your classes end for the term. **Please note: Your last day of class may be earlier than the posted end of term. Fall 2024 Term ends 12/16/24. Spring 2025 Term ends 6/2/25. Summer 2025 Sessions end 8/16/25**

Student's Information

Last Name	First Name	M.I.	Student ID (10 digits)
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Please complete and submit an Income Reduction Request for evaluation if, due to special circumstances, you and/or your spouse or parent(s) [for dependent students] have had some financial change that reduced your income in 2023 or will reduce your income for 2024. Check to indicate to whom special circumstance occurred: **Self and/or Spouse** **Parent(s)/ Step Parent**

You must include all of the following;

- This form and a detailed signed statement(s) from the party whose income/circumstance has changed, explaining the special circumstances surrounding the reduction or loss in your and/or your spouse or parent(s) income, including date(s) of change or loss.
- 2023 signed IRS 1040 or IRS Tax Return Transcript including all Schedules 1, 2 & 3 and W-2s/1099s, if applicable for income changes reflected in 2023. After January 31, 2025, signed 2024 IRS 1040 or IRS Tax Return Transcript Tax Return including all Schedules 1, 2 & 3 and W-2s/1099s for income changes reflected in 2024.
- Documentation for the option(s) below that best fit your circumstances. If you are unable to provide specified documents, please provide a reasonable alternative.

Select all sections that apply to your Income Reduction Request

<p><u>Recent Loss of Income from Wages</u></p> <p>To document loss of employment:</p> <ul style="list-style-type: none"> <input type="checkbox"/> If laid off, letter of termination from employer and copy of final earnings statement (paystub) <input type="checkbox"/> Notice of unemployment insurance award from the Employment Development Department (EDD) <p>If you have reestablished employment or reduction of wages:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Most current wage statement (paystub) from tax filer whose employment changed 	<p><u>Loss of Self-Employment Income</u></p> <p>To document loss of employment:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Letter explaining the reason for loss of income compared to the FAFSA/CADAA tax year. <p>To determine income to be excluded:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Schedule C from most recent IRS Tax Return, if filed, or statements of projected annual net business income.
<p><u>Divorce or Separation</u></p> <p>To determine wages to be excluded:</p> <ul style="list-style-type: none"> <input type="checkbox"/> All W-2s/1099s from most recent tax return for both parties of dissolution [student/spouse or parents] <input type="checkbox"/> Divorce Decree or legal separation statement <input type="checkbox"/> Proof of Separate Dwelling for both parties. This can be utility bills, rental leases, etc. 	<p><u>Death of a Parent or Spouse</u></p> <p>To determine wages to be excluded:</p> <ul style="list-style-type: none"> <input type="checkbox"/> All W-2s/1099s from most recent tax return for both parents or spouse <input type="checkbox"/> Copy of Death Certificate <input type="checkbox"/> Any additional income to be considered (life insurance, death benefits or pension plan)
<p><u>Loss of Child Support or Other Untaxed Income</u></p> <p>To determine support to be excluded:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Court/legal documentation verifying end date of support. <input type="checkbox"/> Documentation showing loss of other benefits or untaxed income 	<p><u>One-Time Unexpected earnings/Early Withdrawal from Retirement/Pension/Annuity, etc.</u></p> <p>To determine support to be excluded:</p> <ul style="list-style-type: none"> <input type="checkbox"/> 1099-R for the FAFSA/CADAA tax year <input type="checkbox"/> Other _____

NOTE: if selected for verification by the U.S. Department of Education, this request will be on hold status until you submit all required verification documentation and the verification process completed by our office.

I/We certify that the information listed above is true and correct to the best of our knowledge and belief. I/We also understand that we are responsible for notifying the Office of Financial Aid of any changes to the reported circumstances and amounts of income. The decision of this request is valid only at San Diego Mesa College. The required signature(s) below authorize San Diego Mesa College Financial Aid Office to make any appropriate changes to the originally reported FAFSA/CADAA data as a result of the review process for all parties of this request.

Student / Spouse Signature

Date

Parent / Step Parent Signature

Date

***** Financial Aid Office Use Only *****