

**Office of Student Financial Aid & Scholarships** 

## <u>Re-Evaluation Using 2019</u> <u>Income/Benefits</u>

Student Name:

NSHE ID:

## **SECTION 1: PROCESSING INFORMATION**

The 2019-20 and 2020-21 FAFSAs were originally completed using 2017 and 2018 income figures, respectively. If there has been a significant change in income between 2017 or 2018 to 2019, students can request a re-evaluation of financial aid eligibility based on 2019 income figures. **Your 2019 federal income tax return must be completed for this request to be considered.** The re-evaluation will only be approved if approval will make the student eligible for additional funds such as the Pell Grant or Subsidized Direct Loans.

After submission, your documents will be reviewed and a communication will be sent to you with decision details. The Financial Aid Office will submit the changes to one or both of the applicable FAFSA applications (2019-20 and/or 2020-21) that we have on file. Once the changes have been made, you will receive an email notification from FAFSA. **Do not submit any further corrections to FAFSA.** Once the changes are finalized, you will receive a revised offer letter from the University that reflects any new aid eligibility.

## SECTION 2: REQUIRED DOCUMENTATION/INFORMATION

For consideration, you must submit:

This form, signed and dated

Your signed 2019 Federal Tax Return and all 2019 W-2s

IRS Schedules 1, 2, 3, and C, if applicable

A brief, detailed letter explaining the reason for changes from 2017 or 2018 to 2019

Please complete the chart below if there are any changes for the 2019 tax year. Enter "0" if not applicable.

Additional Financial Information/Untaxed Income Types	Student	Parent/Spouse
Child Support Paid		
Earnings from need-based employment program(s) such as work-study or portions of internships and fellowships		
Earnings from cooperative education program(s) offered by a college		
Child support received		
Housing, food, and other living allowances paid to members of the military, clergy, and others		
Veteran's non-education benefits		
Workers' compensation		
Disability benefits		
Money received or paid on your behalf (e.g., bills) not reported elsewhere. (Do not include money from parents.)		

## **SECTION 3: CERTIFICATION**

I hereby certify that all information reported on this form and attached documents is true, complete, and accurate. I give consent to the Financial Aid Office to make adjustments to my FAFSA application(s), and understand that false statements or misrepresentation will be cause for denial, reduction, withdrawal, and/or repayment of financial aid. (Parent signature is also required if requesting re-evaluation of parental income.)

Student Signature:		Date:
Parent Signa	ture:	Date:
OFFICE USE OI	NLYApprovedDeniedAdj. EFC Calc New EFC:	Initials: Date:
CONTACT US	Phone: 775-784-4666	ation: 3rd Floor, Fitzgerald Student Services Bldg.