



2017-2018 Income Adjustment Petition – Independent

PY-STU

Name: _____ Evergreen ID A _____
(print) Last First MI

Address: _____ Phone: (____) _____
Street City State ZIP

This petition is designed to allow us to compare your 2016 income with the 2015 income information you provided on your Free Application for Federal Student Aid (FAFSA). If this petition is approved, your financial aid will be adjusted for 2017-2018. **Review of Income Adjustment Petitions begins after March 1, 2017 and will be reviewed in the order received.**

Please provide all of the following documentation check the box that applies to your situation and fill in the untaxed information section:

1. A detailed letter explaining your family's circumstances and what has changed, and
2. The 2017-2018 FAFSA Verification Worksheet (Independent) , and
3. The 2017-2018 Verification of Assets Worksheet (Independent), and
4. Your **2015** Tax Return Transcript from the IRS, and
5. Your **2016** Tax Return Transcripts from the IRS. If you will not file taxes for 2016, please include this information in the letter, and

Please check the box that reflects your situation.

My family's income has declined in 2016 due to:

☐ unemployment, ☐ retirement, ☐ change of employer, ☐ reduction in hours, ☐ a one-time income received in 2015, ☐ death of a wage earner, ☐ divorce/separation, ☐ Permanent or total disability

2016 Untaxed Income Information

Please circle all that apply and put the total amount in the column to the left. If it does not apply, please put \$0 or N/A	Student	Spouse
Payments to tax-deferred pension and savings plans. IRA deductions and payments to self-employed SEP, SIMPLE, and Keogh payments and other qualified plans	\$	\$
Child support received. Tax exempt interest income. Untaxed portions of pensions or IRA distributions	\$	\$
Housing, food and other living allowances paid to members of the military, clergy. Veterans' non-education benefits. Workers' compensation. Disability. Money received or paid on your behalf.	\$	\$

Did you or your spouse pay child support during 2016? ☐ 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: _____

Spouse's Signature: _____ Date: _____

Office of Financial Aid