

Cardinal Central (208) 769-3311 phone (208) 769-3399 fax CardinalCentral@nic.edu

2023-2024 Dependent FAFSA Income Modification Request

Allow 2-3 weeks to review your request STUDENT INFORMATION

Name:		
(First)	(Middle Initial)	(Last)
Student ID Number:	Phone Number: _	
, , ,) income has recently decreased be Aid Office may be able to re-evaluat ation and documentation.	O
*Must submit AFTER the 20	23-2024 FAFSA has been complete	ed and evaluated.
	job change, six weeks MUST have eff submitting this application.	elapsed from the last date
* If you have a zero Expected	l Family Contribution (EFC) this fo	rm cannot be reviewed.
 Letter of Explanation Situational Document Asset Worksheet and of this application 		Form, attached at the end
REQUIREMENT 1: LETI	ER OF EXPLANATION	
circumstances. The le	rplanation providing information aletter should be detailed and include	e important dates.

REQUIREMENT 2: SITUATIONAL DOCUMENTATION

Answer yes or no to the following questions. If you answer yes, include all listed required documentation:				
□No □Yes	 Was there a change in marital status? ☐ If yes, provide the date of separation or divorce, court documents regarding divorce or termination of child support, alimony, and/or lawyer's statement regarding separation. 			
□No □Yes	 2. Is your 2022 tax information more indicative of your current situation? If yes, please provide a signed copy of 2022 1040s, all 2022 W-2(s), unemployment benefits statements, retirement, or termination notice. 			
□No □Yes	3. Was there a reduction in employment within the last 12 months? If yes, provide three consecutive pay stubs/earning statement from all current employers, unemployment benefits statements, retirement, or termination notice.			
□No □Yes	4. Was there a reduction in employment due to disability? ☐ If yes, provide the date of this change, a memo or letter from employer regarding change or reduction in employment, and/or a physician's disability statement indicating inability to work.			
□No □Yes	5. Was there a death in your household?☐ If yes, provide a death certificate or obituary.			
□No □Yes	6. Was there non-recurring income received in 2021? ☐ If yes, provide bank statements to show IRA or pension withdrawals, inheritance, moving allowances, etc.			
□No □Yes	7. Was there a reduction/termination of Social Security income? ☐ If yes, provide Social Security benefits termination notice, death certificate, or obituary notice or other documentation to show changes in Social Security benefits.			
□No □Yes	8. Is there a different circumstance? If yes, please explain your circumstance in the attached letter and provide supporting documentation.			
REQUIREMENT 3: ADDITIONAL FINANCIAL AID FORMS				

2023-2024 Asset & Benefits Worksheet

<u>STUI</u>	DENT					
	Cash, savings, checking accounts	\$				
	Other real estate and investment net worth*	\$				
	Business net worth*	\$				
	Do not include the value of a small business that you/ your parents own and control and that has 100 or fewer full-time or full-time equivalent employees.					
	Investment farm net worth*	\$				
	Do not include the value of a family farm that you/ your parents live on and operate					
	*Net worth = current value minus debt.					
<u>PARI</u>	ENT(S)					
	Cash, savings, checking accounts	\$				
	Other real estate and investment net worth*	\$				
	Business net worth*	\$				
	Do not include the value of a small business that you/ your parents own and control and that has 100 or fewer full-time or full-time equivalent employees.					
	Investment farm net worth*	\$				
	Do not include the value of a family farm that you/ your parer	ats live on and operate.				
	*Net worth = current value minus debt.					
•	y time during 2021 or 2022, did you, your paren shold receive benefits from any of the federal pro					
	Medicaid or Supplemental Security Income (SSI)					
	Supplemental Nutrition Assistance Program (SNAP)					
	Free or Reduced Price School Lunch					
	Temporary Assistance for Needy Families (TANF) Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)					
2023-2024 Dependent Standard Verification Form						

SECTION (1) STUDENT INFORMATION

(Middle Initial)

(Last)

Name: _____

Student ID Number:		Phone Number:		
SE	ECTION (2)	HOUSEHOLD INFORM	ATION	
List the people in your J	parent(s) house	ehold including:		
• Yourself.				
• Your Parent(s) (inc	luding steppare	ent), even if you do not live w	ith your Parent(s).	
support from July 1, 20 provide parental inform who meet either of thes • Other People if they	23 through Jurnation if they we standards, ev	if your Parent(s) will provide ne 30, 2024, or if the other charge completing a FAFSA for 2 wen if they do not physically live your Parent(s) and your Parent	ildren would be required to 1023-2024. Include children we with the Parent(s).	
of their support and will continue to provide more than half of their support through June 30, 2024.				
Full Name	Age	Relationship to Student	Are They Currently in College or Beginning College in 2023-2024? > Yes – which college? > No – N/A	
		STUDENT	NORTH IDAHO COLLEGE	

SECTION (3) TAXABLE INCOME

STUDENT 2021 TAX FILING INFORMATION:

Did you or will you file a 2021 US Income Tax Return?	
Yes. This information will be or has been provided by either (ch	neck one option):
☐ Using the Data Retrieval Tool on the FAFSA to import y	our taxes from the IRS.
Submitting a signed copy of your 2021 1040 Tax Return Tax Return Transcript ordered from the IRS.	and matching 2021 W-2(s) or a 2021
☐ No. Initial the following statement:	
I certify that I did not file taxes in 2021 and I certify that I tax return based on the IRS tax filing guidelines.	am not required to file a 2021 income
Did you have W-2 income in 2021?	
☐ No.	
Yes. You will need to provide all W-2(s) for 2021.	
PARENT 2021 TAX FILING INFORMATION:	
Did your parent(s) or will your parent(s) file a 2021 US Incor	me Tax Return?
☐ Yes. This information will be or has been provided by either (ch	neck one option):
☐ Using the Data Retrieval Tool on the FAFSA to import t	heir taxes from the IRS.
☐ Submitting a signed copy of their 2021 1040 Tax Return Tax Return Transcript ordered from the IRS.	n and matching 2021 W-2(s) or a 2021
☐ No. Your parent(s) must submit:	
 A Verification of Non-filing Statement ordered from th All W-2(s) for 2021. 	ne IRS using the 4506-T form.
SECTION (4) INITIAL AND SIGN TH	IIS WORKSHEET
HAND-WRITTEN SIGNATURES ONLY - DIGITAL/TYPED SIGNA	ATURES WILL NOT BE ACCEPTED
BY SIGNING THIS WORKSHEET, I CERTIFY THAT ALL IN FOR FEDERAL STUDENT AID IS COMPLETE AND CORRECT. THE THAT OF THE ORIGINAL PERSON. FALSIFYING A SIGNATURE W COLLEGE'S CODE OF CONDUCT AND RESULT IN DISCIPLINARY	SIGNATURES LISTED BELOW ARE VILL VIOLATE NORTH IDAHO
I UNDERSTAND IF I PURPOSEFULLY GIVE FALSE INFORMAY BE FINED, BE SENT TO JAIL, OR BOTH. NORTH IDAHO COLQUESTION THE VALIDITY OF THIS INFORMATION AND MAY RESTANDARD VERIFICATION FORM.	LEGE RESERVES THE RIGHT TO
Student Printed Name:	Date:
Student Signature:	
Parent Printed Name:	Date:
Parent Signature	