Kankakee Community College 2024-2025 Income Adjustment Form Independent Student

OFFICE OF FINANCIAL AID 100 College Drive • Kankakee, IL 60901-6505 • (815) 802-8550 • FAX: (815) 802-8551

Federal Student Aid Regulations provide the potential for reevaluation if your financial circumstances change. The 2022 income information that you reported on your financial aid application may not be an accurate indicator of your ability to pay for educational costs. You (or your spouse) must meet one of the circumstances listed below to qualify for reevaluation of your financial aid eligibility.

Once you have completed all steps below, return this form along with the **required supporting documentation** to the Kankakee Community College Office of Financial Aid. Submission of this form does not guarantee a change in your financial aid eligibility. Each case will be evaluated on an individual basis.

STED I: Student Information

STEP 1: Student Information				
Name				Date
	Last	First	M.I.	
Perma	anent Address			
Stude	ent Soc. Sec. #		Phone ()	
STEP	II: Required Documenta	tion		
	use the FA-DDX transfer. Tax Submit a 2023 Tax Return Transcripts can be requested Submit a 2024 last payche	Transcript (Including Schedule Return Transcripts can be request Transcript (Including Schedule	ted online at www.irs.gov . es 1,2, and 8863) for YOU and room all employers for YOU and YOU a	nd your SPOUSE. Tax Return
STEP	PIII: Reason for Filing an	ı Income Adjustment Form a	and <i>provide additional d</i>	locumentation.
□ A.	1. Statement on company l 2024 indicating the date	noney in 2022, but lost a full-time j : letterhead from all previous employ you (or your spouse) ceased empl unemployment benefits received	vers you (or your spouse) work	
□ B .	Required Documentation: 1. Statement on company I	ly employed but is making significa : letterhead from ALL previous emplo you (or your spouse) ceased empl	byers you (or your spouse) wo	
□ C .	(10) weeks in 2022, but complete benefits, court-ordered child subenefits.) Required Documentation:	unemployment compensation or so etely lost that income or benefit. (In inport, retirement benefits or disab : In from the source of income or ben	ncome and benefits include su ility benefits. Don't include los	ch things as: Social Security

- 2. Statement from the source of income or benefit indicating the dates you (or your spouse) received the income or benefit and the estimated income or benefits received in 2022.
- □ **D.** Since you applied for financial aid for 2024-2025, you and your spouse have separated or divorced.

Required Documentation:

- 1. If you are separated, attach a signed statement indicating the date of separation; or
- 2. If you are now divorced, attach a copy of the divorce decree
- □ **E.** Since you applied for financial aid for 2024-2025, a supporting spouse has died.

Required Documentation:

1. Copy of your spouse's death certificate

	u (or your spouse) received a one-time income in 2022, puired Documentation: 1. Statement from source of one-time income indicating 2. Statement from you (or your spouse) indicating the				
□ G. Yo	 G. You paid (not owed) a large amount of medical and/or dental expenses in 2022. Required Documentation: Medical Expenses Paid in 2022 \$				
□ H. Yo	aid awarded.2. Copy of the family member(s) registration statement	lege. The letter should include the Cost of Attendance and any financial			
	V: Personal Statement- Specifically explain you entation.	r situation. If more space is needed, please attach additional			
Certificate If asked proof ma	by an authorized official, I agree to give additional proof	ched documentation is true and complete to the best of my knowledge. If of the information that I have given on this form. I realize that this realize that if I do not give proof when asked, the Income Adjustment			
Student	Signature	Spouse Signature			
Date Co	ompleted	_			
OFFICE	E USE ONLY				
□ Appro	oved Denied Date	Staff Signature			

Reason for Denial _____