



Request for Income Review
18-19 FSAPRJ

Your 2018-2019 financial aid application reflects income information from the 2016 calendar year. If you, or your family's, financial situation has significantly changed from 2016, you may request to have your financial aid eligibility re-evaluated using more current income information. To initiate the review process, please complete this form and attach a personal statement detailing the change in income and circumstances.

Student Name: _____

Campus ID Number: _____

Status at CSULB:	Applicant	Newly Admitted	Current/Returning Student
Aid Application Completed:	2018 – 2019 FAFSA	2018 – 2019 CA DREAM Application	

CHANGE IN CIRCUMSTANCES

Check all appropriate boxes

Loss/Reduction of Income	Loss/Reduction of Benefits (<i>please specify</i>) _____
Separation/Divorce	Death of Parent/Spouse
Other (such as extraordinary medical expenses) _____	

Name of person whose situation has changed: _____

Relationship to Student: **Self** **Parent** **Student's Spouse**

Date change(s) occurred: _____ **Is the situation ongoing?** **Yes** **No**

PERSONAL STATEMENT INSTRUCTIONS

Attach a type-written statement regarding the change(s) in income. Your statement must include the following:

- A detailed explanation regarding the change in income and what caused it. Please include when the change occurred and whether the change was a one-time occurrence.
- Any income or benefits received that are associated your change in circumstances (unemployment, disability, severance, insurance payment). Specify the amount of income or benefits and when you have or will receive payments.
- Any extraordinary expenses you have incurred, such as medical costs. Note that insurance premiums, payments reimbursed by medical insurance, and medical expenses claimed as a deduction on your IRS tax return will not be reviewed.
- Any changes that are expected in the near future. For instance, if your situation is related to a job loss, are you anticipating new employment in the next 6 months?
- How this change has affected your ability to pay for your educational expenses. Be specific as it relates to income loss and/or loss of personal resources.

NEXT STEPS

This is a two-step process. After submitting this form and personal statement we will review your request and contact you by email. We may request additional information or send you the Income Appeal Form to request supporting documents or information related to your specific circumstances.

Return This Form and Supporting Documentation:

By Mail:
CSULB Office of Financial Aid
1250 Bellflower Blvd.
Long Beach, CA 90840-0106

By Fax:
(562) 985-4973
Be sure to indicate "Attention Financial Aid"

In Person:
Enrollment Services Windows
Brotman Hall 1st Floor Courtyard