

FINANCIAL AID & SCHOLARSHIP OFFICE 1000 East Victoria Street Carson, California 90747 PHONE: (310) 243-3691

CSUDH ID:_____

Today s Date: _____

Financial Aid Document Submission Cover Sheet

Please complete the information requested below, submit this form along with your documents.

REMINDER: When uploading your documents to the **online** <u>Dropbox</u>, please exercise caution when using Free WiFi or Public Computers as these are not secure.

Student Name:				
Toro Email Addre	ess:			
Phone Number:	(Area Code)	(i.e. 222-1234)		

Note: Please be sure to include your **CSUDH student ID number** on each page submitted and allow up to 4 business days for your **To Do List** to be updated.

SUBMISSION INSTRUCTIONS:

On the following page(s), complete all requested information using the fillable document below. Your document must be complete to be accepted by the Financial Aid & Scholarship Office. Forms that are incomplete will remain on your To-Do-List in the Student Center.

- 1. Upon completing this document, scroll to the bottom where you are asked to sign and date. In the signature area, type or sign your name and in the date space type today's date.
- 2. Save your document and be sure to include your name and CSUDH Student ID# within the file name.
- 3. If you have attachments, please have them ready to upload to the online Dropbox
- Return to the <u>Financial Aid Forms</u> page > go to the <u>blue Dropbox Folders</u> section > <u>select the icon that</u> <u>corresponds with your last name</u> > use the "Add Files" or "drag and stuff here" option to upload your documents. <u>Emailed documents will not be accepted.</u>
- 5. Once all documents have been submitted, be sure to close your browser.

In furtherance of CSU Dominguez Hill's mission of accessibility and commitment to excellence through diversity, equity, and inclusion, CSUDH strives to ensure that its information and communication technology is accessible to everyone. If you need assistance in completing this form because of a disability, please contact us at (310) 243-3660



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Student's Name:

CSUDH ID#:

2023-2024 Income Adjustment Appeal Form

Your **2023-2024** financial aid application reflects income information from the **2021** calendar year. If you or your family's financial situation has changed, you may request to have your financial aid eligibility re-evaluated using **2022 or 2023 income** information. Complete this form and submit the required documentation to the Financial Aid Dropbox located at: <u>www.csudh.edu/financial-aid/forms/</u>. You will be notified via your Toro mail account once your appeal has been reviewed.

Submission Deadline: Thursday, April 25, 2024 (Fall only students: Thursday, November 16, 2023)

Step 1: Select <u>the person(s)</u> impacted by change (check all that apply): Student Spouse Parent(s)

Step 2: Select <u>the year</u> the loss of income occurred below (select only one option):

2022 tax year. Please submit the following documentation:

- A signed copy of the 2022 U.S. Individual Income Tax Return (Form 1040) along with all schedules.
- If a 2022 tax return <u>was not</u> filed, please submit the <u>two</u> items below:
 - An IRS Verification of Non-Filing Letter (dated on or after October 1, 2022). Visit <u>www.irs.gov</u> and select "Get Your Tax Record" (and)
 - A typed, signed statement indicating all sources of income and financial assistance received in 2022 to meet basic living expenses.

2023 tax year. Please submit the following documentation:

• A typed, signed statement that provides a detailed explanation regarding the change in income, including the month and year the change occurred. *This statement should be signed by the person impacted by the change*.

NOTE: If this form is <u>submitted after January 1, 2024</u> and 2023 was the year the income was impacted, submit a signed copy of 2023 U.S. Individual Income Tax Return (Form 1040) along with all schedules.

Step 3: Include *additional supporting documentation* specific to your situation. See examples below.

Loss of job

- Letter from employer showing the last date worked.
- Copy of final paycheck stub(s) showing year-to-date earnings.
- Documentation of unemployment benefits awarded (if applicable).

Reduction of work hours

- A copy of the most recent paycheck stub showing year-to-date earnings.
- Date reduction occurred: _____ Hourly Pay Rate: _____ Current Hours Per Week: _____

Other circumstance(s):

- Submit a typed, signed statement to explain the circumstances and attach appropriate documentation.
 - For example: Divorce/Separation after filing your FAFSA or CA Dream Application.

CERTIFICATION

The signature(s) below certify that this information is true and gives the Financial Aid & Scholarship Office at CSUDH permission to make changes to my financial aid offer based on this request.

Student Signature (Required)