Rensselaer Polytechnic Institute
Change of Family Circumstances
2024-25 Award Review Request

STUDENT NAME AND RIN (Rensselaer ID Number) MUST APPEAR ON ALL ATTACHMENTS

<table>
<thead>
<tr>
<th>Student Name:</th>
<th>Rensselaer ID (RIN):</th>
<th>EMail:</th>
</tr>
</thead>
</table>

Enrollment Status (check one):      ____  New, Incoming Student           ____  Current, Returning, or Re-enrolling student.

About Eligibility Review Request Processing:

1 Documentation Required:  Provide documentation that supports your financial and personal information statements.
Incomplete requests may be delayed or returned. Additional information will be requested when necessary.
Example:  Student provides parent wage data, but there is no parent signature:  Review delayed until signatures received for parent data.
Example:  Family statement indicates child support is being received but $0 is reported in the financial section:  Additional follow-up required.

2 Descriptive Statement:  You must provide a written description about your current financial situation.
Example:  If you are reporting a reduction in wages due to COVID-19 economic impacts in 2020 let us know if you returned to work before the end of 2020;  if you have not returned to work or are working but earning less, describe your current or planned income environment.

3 Signatures:  The student and/or parent(s) providing financial data must sign the review form.

4 Notification of Outcome:  If we are able to make a revision to your aid, a notification will be sent when the review is completed

Return your documents to the address above, fax (518) 276-4797, or upload- https://admissions.rpi.edu/aid/upload

Who is Experiencing the Loss of Income?
Name of person proving FAFSA income data

<table>
<thead>
<tr>
<th>Parent 1 on FAFSA</th>
<th>Parent 2 on FAFSA</th>
<th>Student or Spouse</th>
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Reason for Loss of Income (check all that apply):
- Loss of Employment
- Forced Reduction to Paid Work Hours
- Change of Job with Reduction in Pay
- Loss of Business Income
- One-Time Pension Withdraw or Roll-Over
- Other:  ____________________________

Start Date of Income Reduction:

End Date of Income Reduction:

COVID-19 Pandemic Impact
If person became unemployed due to COVID-19 pandemic impact to economy, have they returned to the same employer with same/similar pay as before?

Y / N  Y / N  Y / N

APPEALG 2425
2023 Tax Year Income and Taxes Paid:

* Report Taxes Paid and retained by IRS, Not Withholdings from W-2 Statements.
* Provide copies of 2023 Federal 1040 and/or other year-end documents to support your numbers.
* Provide employer letters or other “agency statements” that may help our understanding of your current financial situation.
* Continue to the next section to provide your 2023 tax year income data.

Prior to Actual 1040 Filing
Provide Estimated Data and 2023 Year-end Financial Documents

<table>
<thead>
<tr>
<th>Parent 1</th>
<th>Parent 2</th>
<th>Student &amp; Spouse</th>
</tr>
</thead>
<tbody>
<tr>
<td>on FAFSA</td>
<td>on FAFSA</td>
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</table>

Did or will you file 1040 “Schedule 1” for Additional Income types? (This is not Schedule A for Itemized Deductions)

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<thead>
<tr>
<th>Y</th>
<th>N</th>
<th>Y</th>
<th>N</th>
<th>Y</th>
<th>N</th>
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<tbody>
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Adjusted Gross Income from 2023 Federal 1040 Tax Form
(If a joint return was filed, note AGI under Parent 1 only)

<table>
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Employment Income / Wages
Interest / Dividend Income
Allimony Received
Business or Rental Property Income
Unemployment Compensation
Taxable Social Security Benefits
Taxable Pension or Retirement Distributions
Other:

2 Total Taxes Paid: From 2023 Federal 1040

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3 Untaxed Income: Provide 2023 Year end totals.

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Child Support Received
Public Assistance (TANF)
Untaxed Pension or Retirement Distributions
Untaxed Social Security Benefits (type: ______________________)
Pre-Tax Retirement Account Contributions
Other:

4 Value of Necessary Expenses Paid for by Others

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Mortgage or Rent Payments Made on Your Behalf
Value of Utility Bills Paid on Your Behalf
Value of Additional Required Bills or Expenses Paid By Others

C SIGNATURES:

Sign here to indicate your agreement that all information provided about you within this request are true to the best of your knowledge.

Student
Spouse / Parent 1
Parent 2

Signature
Date

Please return this form and all supporting documents to the address above, fax (518) 276-4797, or upload to https://admissions.rpi.edu/aid/upload. Incomplete forms will delay the processing of your request.