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.

SIEP	1: Student Information				
Name	2			Date	
	Last	First	M.I.		
Perm	anent Address				
Stude	ent Soc. Sec. #		Phone ()		
STEP	P II: Required Documenta	ation			
	Complete this form in its entirety Submit a 2022 Tax Return Transcript for YOU and your SPOUSE if you did not use the FA-DDX transfer. Submit a 2023 Tax Return Transcript for YOU and your SPOUSE Submit a 2024 last paycheck stub with YTD information from all employers for YOU and your SPOUSE Submit a 2024-2025 Independent Verification Worksheet				
STEP	PIII: Reason for Filing a	n Income Adjustment Form	and <i>provide additional d</i>	ocumentation.	
□ A.	 Required Documentation Statement on company 2024 indicating the dat 	money in 2022, but lost a full-time gas: letterhead from all previous emploge you (or your spouse) ceased empunemployment benefits received	yers you (or your spouse) work		
□ B.	Required Documentation 1. Statement on company	tly employed but is making significant: letterhead from ALL previous emple you (or your spouse) ceased emp	oyers you (or your spouse) wor	ked for in 2022, 2023 and/or	
□ C .	(10) weeks in 2022, but comp	unemployment compensation or so letely lost that income or benefit. (I upport, retirement benefits or disab	Income and benefits include suc	ch things as: Social Security	
	 Statement of termination Statement from the source 	on from the source of income or be arce of income or benefit indicating are or benefits received in 2022.		received the income or benefit	

1. Copy of your spouse's death certificate

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:

Required Documentation:

□ **D.** Since you applied for financial aid for 2024-2025, you and your spouse have separated or divorced.

1. If you are separated, attach a signed statement indicating the date of separation; or

		such as Social Security payment, inheritance, IRA/pension distribution.
	red Documentation: Statement from source of one-time income indicatin	g amount: and
	Statement from you (or your spouse) indicating the	
	<u>paid</u> (not owed) a large amount of medical and/or denequired Documentation: Medical Expenses Paid in 2	
		f expenses were itemized (exclude insurance premiums paid)
	Copies of medical and dental payments not covered	
	additional family members in college creates a financia	ıl hardship on your family.
	equired Documentation: Copy of the offer letter for family member(s) in colle	ege. The letter should include the Cost of Attendance and any financial
	aid awarded.	sge. The letter should include the cost of Attendance and any financial
	Copy of the family member(s) registration statement	
3.	In your personal statement below, please include yo	our relationship with the family member(s) that are in college.
STED IV:	Personal Statement- Specifically explain your	situation. If more space is needed, please attach additional
documenta	. , , , ,	Situation. If more space is necuca, pieuse attach additional
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	Read, Sign, and Return to the Kankakee Co	
		ned documentation is true and complete to the best of my knowledge. of the information that I have given on this form. I realize that this
		ealize that if I do not give proof when asked, the Income Adjustment
will not be re		culte that if I do not give proof when asked, the Income Adjustment
Student Sig	gnature	Spouse Signature
Date Comp	pleted	_
OFFICE !!	ICE ONLY	
OLLICE O	JSE ONLY	
⊐ ∆nnrovo	ed □ Denied Date C	Staff Signature
⊐ √hbiove	Lu Deffieu Date 3	ocan Signacure
Reason for	r Denial	
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