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# 2020-2021 Professional Judgment Change in Income

Student Name:	ID#:
Phone#:	Email:

#### STEP 1: Verifying original information

Your 2020-2021 FAFSA must be completed using data from your 2018 tax return. We understand that changes in income may occur between tax years. In this process, TSC will be comparing information between 2018 and 2019 federal tax returns OR 2018 and 2020 federal tax returns. Failure to submit the required documentation will delay processing of your file.

## STEP 2: Check the reason(s) you are requesting an income adjustment and attach the required documents:

STUDENT	PARENT		
Change in income between 2018 & 2019	Change in income between 2018 & 2019		
tax years. Must provide the following:	tax years. Must provide the following:		
<ul> <li>2018 &amp; 2019 signed tax returns, and any</li> </ul>	<ul> <li>2018 &amp; 2019 signed tax returns, and any</li> </ul>		
attachments (Schedule C, E, or F, etc.).	attachments (Schedule C, E, or F, etc.)		
• W2s for each tax year.	W2s for each tax year.		
OR	OR		
Change in income between 2018 & 2020	Change in income between 2018 & 2020		
<i>tax years</i> . Must provide the following:	<i>tax years</i> . Must provide the following:		
<ul> <li>2018 &amp; 2020 signed tax returns, and any</li> </ul>	<ul> <li>2018 &amp; 2020 signed tax returns, and any</li> </ul>		
attachments (Schedule C, E, or F, etc.)	attachments (Schedule C, E, or F, etc.)		
• W2s for each tax year.	W2s for each tax year.		

\_ Change in marital status of student or parent due to Death of Spouse:

- Copy of death certificate
- \_\_\_\_\_Unusual medical, dental, or health-related expenses (must be greater than 7.5% of the adjusted gross income for 2019.
  - A copy of Schedule A of the Federal 1040 form, if filed, or cancelled checks or receipts showing amount paid
  - Statement from health insurance provider indicating unreimbursed expenses for 2019.

\_\_\_Other changes in income (such as loss of/reduction of child support, loss of military benefits, etc.). Specify type of change\_\_\_\_\_.

Please attach proof of amounts received during 2018 and 2019 OR 2018 and 2020.





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## STEP 3: Complete change of income chart. Do not leave any blanks.

2018	2019	2020	Yearly Income/Benefits	2018	2019	2020
Student/Spouse	Student/Spouse	Student/Spouse		Parent(s)	Parent(s)	Parent(s)
\$	\$	\$	Adjusted Gross Income	\$	\$	\$
\$	\$	\$	Wages,/Salaries	\$	\$	\$
\$	\$	\$	Self-employment wages	\$	\$	\$
\$	\$	\$	IRA Distributions	\$	\$	\$
\$	\$	\$	IRA Deductions	\$	\$	\$
\$	\$	\$	Pensions and annuities	\$	\$	\$
\$	\$	\$	Rental real estate, partnerships, royalties	\$	\$	\$
\$	\$	\$	Farm Income	\$	\$	\$
\$	\$	\$	Unemployment Benefits	\$	\$	\$
\$	\$	\$	Tax Deferred Pensions (W2 Box 12)	\$	\$	\$
\$	\$	\$	Worker's Comp.	\$	\$	\$
\$	\$	\$	Child support received	\$	\$	\$
\$	\$	\$	Veterans Non- education benefits	\$	\$	\$
\$	\$	\$	Other Untaxed/Non- reported income	\$	\$	\$

#### **STEP 4: Signatures**

Your signature on this document confirms your acknowledgement of the following:

The information submitted for review is true and correct to the best of my knowledge. Changes resulting from this review do not guarantee an increase in aid. I understand additional documentation may be required upon request. During peak processing times, there may be a 10-15 business day processing time for the request. At the time of review, student cannot be in default nor in suspension status.

You may email, fax, mail or hand-deliver documents to: TSC Financial Aid Office Oliveira Student Services Center 80 Fort Brown, Brownsville, Texas 78520 Fax: (956) 295-3621 Email: <u>financialaid@tsc.edu</u>

Student Signature:	Parent Signature:	Date:
For office use only Approv	ad Deniad Financial Aid Officary	Data
For office use only:Approve	edDenied Financial Aid Officer:	Date:
Comments:		