Heritage University
Office of Financial Aid

2019-2020
Student Contribution Revision Request

Student Name_____ Student ID#_____

Financial aid eligibility is based on prior year income and assets as reported on the FAFSA. If unusual circumstances have seriously altered your current financial status, you may request a reevaluation. If you have ceased working, or if a benefit has been reduced or canceled, documentation may be required.

A. REASON FOR REQUESTING REVISION

☐ INVOLUNTARY LOSS OF INCOME: Income lost for at least 10 weeks. **Explain on back and provide documentation**.

☐ DEATH: The student has already applied for Federal Student Aid, but since that time, the family wage earner has died. **Explain on back and provide documentation**.

☐ OTHER: There is a change in income, but it does not fit one of the above reasons. **Explain on back and provide documentation**.

B. ESTIMATED INCOME: Complete each line. **ENTER 0 if none. Submit documentation.**

INCOME FOR JANUARY 1st TO DECEMBER 31st	**TOTAL**
Expected income earned from work by student (wages, salaries, tips, net business/farm income)	$
Expected income earned from work by spouse (wages, salaries, tips, net business/farm income)	$
Other taxable income (dividends, interest, pensions, annuities, alimony, unemployment compensation, capital gains, etc.)SOURCE:	$
Social Security benefits	$
Temporary Aid for Needy Families (TANF, AFDC, ADC)	$
Child support received	$
Other untaxed income (earned income credit, welfare benefits, Work First, SSI, Worker's Comp, payments to IRA/Keogh, etc.) SOURCE:	$
TOTAL INCOME FOR THE YEAR	$
NOTES:	

I CERTIFY THAT THE ABOVE INFORMATION IS TRUE AND COMPLETE TO THE BEST OF MY KNOWLEDGE. IF THE INFORMATION CHANGES, I MUST NOTIFY YOU IN WRITING.

_____ _____

Student Signature **Date** **Spouse's Signature (if applicable)** **Date**

Submitting this application via email constitutes your electronic signature. This application shall be deemed for all purposes to have been "signed" and will constitute an "original" when printed from electronic records established and maintained by The Office of Financial Aid & Scholarships, if an electronic signature is contained.

Return signed and completed form(s) or other documents to your local campus.

Main Campus: 3240 Fort Rd, Toppenish, WA 98948 Phone: (509) 865-8502 Fax: (509) 865-8659 Email: financial_aid@heritage.edu