



MANCHESTER  
COMMUNITY  
COLLEGE

## 2016-2017 Money Appeal Form

Name: \_\_\_\_\_ Banner ID: \_\_\_\_\_ Date: \_\_\_\_\_

Parent Name (for dependent students only): \_\_\_\_\_

If you wish reconsideration of your aid eligibility, please fill out this form and submit it to the Financial Aid Office. If the information you will report or have reported on your Free Application for Federal Student Aid (FAFSA) does not accurately reflect your current financial situation, you may submit additional documentation so we can recalculate your eligibility.

If you are considered dependent of your parents, remember to also complete the parent sections. If you are considered an independent student, you may skip the parent sections. Please feel free to use additional sheets of paper to explain extraordinary circumstances.

### PART 1

Please check off below the appropriate circumstance that applies to you and your family and submit the proper supporting information.

Please submit your signed copies of the 2015 Tax Return Transcripts and W'2 forms. If you are a dependent student, please submit your parents' 2015 Tax Return Transcripts and W'2 forms as well.

- \_\_\_ A. You or your parent(s), if dependent, worked full-time in 2015 but lost his/her job and remained unemployed for at least 10 weeks during 2015.  
*Documentation required: Last paystub and a statement indicating last day of employment.*
- \_\_\_ B. You or your parents, if dependent, have become separated or divorced after submission of your original FAFSA. Please list the date of separation or divorce: \_\_\_/\_\_\_/\_\_\_.  
*Documentation required: A copy of the temporary separation order or divorce decree.*
- \_\_\_ C. Your parent(s), if dependent, whose 2015 income was reported on the FAFSA, died after submission of the original application.  
*Documentation required: Death certificate.*
- \_\_\_ D. Other circumstances.  
*Documentation required: Attach a separate letter explaining in detail the income reduction in your family.*

**Please complete reverse side.**

**PART 2**

Please complete the income information below.

**Anticipated Income for 2016**

If dependent and your parents are divorced or separated, give only the information of the custodial parent.

	<b>Parent(s)</b>	<b>Student</b>
1. Wages, salaries, tips or any other income from work	_____	_____
2. Other taxable income (list: _____)	_____	_____
3. Untaxed Social Security Benefits	_____	_____
4. Unemployment benefits	_____	_____
5. Child support	_____	_____
6. Veteran's benefits	_____	_____
7. Alimony	_____	_____
8. Other untaxed income	_____	_____
9. <b>TOTAL ANTICIPATED INCOME FOR 2016</b>	\$ _____	\$ _____

**PART 3**

All of the information on this form is true and complete to the best of my knowledge.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Parent signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Date