2015-2016 Request for Re-evaluation

This form can be used to request a review of federal financial aid when there is a current significant reduction in family income or when there are present extenuating financial circumstances. Please do not submit this form unless you are an admitted student to Hofstra and have a complete and valid 2015-2016 Free Application for Federal Student Aid (FAFSA) that is on file with Hofstra. If your FAFSA is selected for verification of 2014 income, this process must be completed first before Student Financial Services may process the re-evaluation.

To help us determine if any adjustment can be made to your federal financial aid awards, please submit the following:

1) Signed and completed 2015-2016 Request for Re-evaluation Form (the entire form must be completed or it may delay the processing time)

2) Verification Documents: (If filing after January 1st, 2016, 2014 & 2015 tax return transcripts are required)
   B. Copy of your/your spouse’s 2014 W2 form(s)
   C. Independent 2015-2016 Verification Worksheet (attached)

3) Please indicate the circumstance(s) for which you are requesting a Re-evaluation:

   ——— Involuntary Loss of Employment
   ——— Loss of Other Income/Benefits
   ——— Separation/Divorce
   ——— Death of Your Spouse
   ——— Excessive Medical Expenses Paid

Please read Section I for additional documentation that you must provide in order to complete the process.

Return all applicable documentation to:
Office of Student Financial Services (Financial Aid), 126 Hofstra University, 206 Memorial Hall, Hempstead, NY, 11549-1260 or scan and email to sfs@hofstra.edu or fax to 516-463-4936. If you are uncertain as to whether your situation can be considered for Re-evaluation or have questions about the process, please contact us at (516) 463-8000.

Student Name: ____________________________  Hofstra ID# : 7
SECTION I – Special Circumstance Information and Checklist

A. Loss of Employment
You/your spouse earned money in 2014 and have lost employment in 2015, because of termination, layoff, disability, retirement, company closing or plant shutdown.
Name of unemployed student/spouse __________________________________________
Date unemployment began: __________/________/________
If applicable, date returned to work: __________/________/________
__ Copy of termination notice or a statement from employer indicating last date of employment and the reason for the loss of employment (i.e. termination, layoff, disability, retirement, company closing or plant shutdown)
__ Most recent pay stubs (including your last pay stub)
__ Unemployment benefits document (must be submitted within 90 days of issuance)

B. Loss of Other Income/Benefits
You/your spouse received income in 2014 and have lost that income for 2015. The income must be from a public or private agency, a company or a person ordered by the court to provide that income such as taxable Social Security benefits, untaxed court-ordered child support, untaxed retirement or disability benefits, or Temporary Assistance for Needy Families (TANF). A one-time event caused by a catastrophic occurrence resulting in a substantial loss to one’s personal property(s) or belongings that have exceeded insurance coverage. Please refer to Student Financial Services for the appropriate submission of documentation in regards to catastrophic occurrences.
Name of person who lost the benefit: ______________________________________
Type of benefit lost: ______________________________________
Date benefit last received: __________/________/________
__ Proof of your loss of income from appropriate agency
__ Most recent pay stubs (including your last pay stub)

C. Separation/ Divorce
You have separated or divorced AFTER the Free Application for Federal Student Aid (FAFSA) was filed. Separation or divorce must be prior to January 1, 2016.
Date of separation/divorce: __________/________/________
__ Copy of the divorce decree, separation document or letter from Attorney
__ Copy of utility bills- other proof of separate residence

D. Death
Your spouse died after the Free Application for Federal Student Aid (FAFSA) was filed.
Name of deceased: ______________________________________
Date of death: __________/________/________
__ Copy of death certificate

E. Excessive Medical Expenses Paid
You/your spouse have incurred unusually high uninsured or unreimbursed medical, optical, and/or dental expenses (including insurance premiums) that are in excess of 11 % of the total 2014, Adjusted Gross Income (AGI) and have not already reduced the AGI by filing itemized deductions.
__ Submit a detailed cover letter and a) a copy of the federal tax return Schedule A or b) copies of the receipts showing the amounts you/your spouse paid (if you are filing due to medical expenses incurred with insurance, the receipts/documents need to clearly illustrate the amount paid by insurance and the amount paid out-of-pocket, include written notations to clarify on each receipt).
SECTION II – 2015 Estimated Income

List the names of all the places where you have worked during 2015 along with total earnings to date before taxes. Please report your total taxable and untaxed income beginning January 1, 2015 through today’s date in Column B. Please list your estimated total taxable and untaxed income from tomorrow’s date through December 31, 2015, in Column C.

Do not leave questions blank; enter the appropriate numbers or "0" when no income is received.

<table>
<thead>
<tr>
<th>A. Name of Employer/Company or Source of Income</th>
<th>B. Actual Income from 01/01/2015 to Today’s date (/ /)</th>
<th>C. Estimated Income from Tomorrow through 12/31/2015</th>
<th>Total 2015 Income (column B+C)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student’s wages:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Student’s unemployment compensation:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Spouse’s wages:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Spouse’s unemployment compensation:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Severance Pay:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other taxable income may include interest or dividend income, alimony, pensions, annuities:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Business or farm income taxable social security (include benefits received by you for all your dependent children):</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Temporary Assistance for Needy Families (TANF):</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Child support received for all children:</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Other untaxed income and benefits (i.e. disability; workmen’s compensation; payment to tax deferred pension and savings plan such as 401(K) or 403(B) plans; housing, food, or other living allowances; maintenance income from a separated spouse; cash support provided to you and/or bills paid by others on their behalf):</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

* Section II must be complete in order to proceed with the Re-evaluation process
SECTION III – Explanation of Circumstances

Use this space below to provide a detailed explanation of the circumstance(s) which will result in a significantly lower income in 2015, as compared to 2014. Attach additional sheets if necessary.

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SECTION IV – Certification

We certify that all the information and documentation is accurate and complete. We agree to provide additional documentation if it is requested. We understand that reporting of this information could result in a change/loss of financial aid that has already been awarded on the basis of inaccurate information initially provided. There is no guarantee of additional funding

Student’s signature ___________________________ Date: ___________________
Your application was selected for review in a process called "Verification." In this process, your school will be comparing information from your FAFSA application with copies of yours and your spouse's 2014 Federal tax transcripts, or with W-2 forms or other financial documents. The law states we have the right to ask you for this information before awarding Federal aid. If there are differences between your FAFSA application information and your financial documents, you or Hofstra University may need to make corrections electronically or by using your Student Aid Report (SAR).

Submit this information to the Office of Student Financial Services (Financial Aid) immediately since federal and/or University need-based aid awarded is estimated until this process is complete. Failure to complete verification in a timely manner may lead to cancellation of aid. Upon review of the documentation you submit, additional information may be required; notification of such will be made as quickly as possible. You will be notified if FAFSA corrections result in changes/cancellation of award(s).

1. Submit the completed 2015-2016 Independent Verification Form. Make sure the form is signed by the student (and spouse if applicable). This form is four-sided and needs to be filled out completely; if the answer is zero or if the question does not apply to you, write "0", do not leave blank.

2. Submit 2014 Federal Tax Transcript(s) and W2 forms for both student and spouse, if filed. As per federal regulations, we can no longer accept copies of the filed federal tax return unless it is specifically requested by the financial aid department.
   • You can obtain a “Federal Tax Return Transcript” by going to www.IRS.gov/transcript. Here you now have the option of receiving your tax transcript online instantly. For security purposes, you will be prompted a series of questions that are based on your financial history. If this is not an option for you, you may request a tax transcript online to be mailed to your home address or by calling the IRS at 1-800-908-9946. Please allow 7-10 business days to receive. Make sure to request the “Return Transcript” and not the “Account Transcript”.

In most cases, for electronic filers, a 2014 IRS Tax Return Transcript may be requested from the IRS within 2-3 weeks after the 2014 IRS income tax return has been accepted by the IRS. Generally, for filers of 2014 paper IRS income tax returns, the Tax Transcript may be requested within 8-11 weeks after the paper return has been received by the IRS.

• The best way to verify income is by using the IRS Data Retrieval Tool (IRS DRT) that is part of FAFSA on the web at www.FAFSA.gov. Please note, this option is available to most tax filers, not all. If you are unable to utilize this option, you MUST request an “IRS Tax Return Transcript”.

A. Student Information

Last name    First name    M.I.    Hofstra ID Number
Address (include apt. #)    Date of birth
City    State    Zip Code    Phone number (include area code) / Cell
B. Family Information

List the people in your household, including:

- *yourself,* 
- your spouse if you have one, regardless of gender and 
- your children, if you will provide more than half of their support from July 1, 2015 through June 30, 2016, even if they 
  they do not live with you, and  
- other people if they now live with you, and you provide more than half of their support and will 
  continue to provide more than half of their support from July 1, 2015 through June 30, 2016

<table>
<thead>
<tr>
<th>Full Name</th>
<th>Age</th>
<th>Relationship</th>
<th>College Enrollment Between 7/1/15 – 6/30/16</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Self</td>
<td>Hofstra University</td>
</tr>
</tbody>
</table>

☐ Yes ☐ No Did you or someone in your household as indicated above, receive “Food Stamps-SNAP (Supplemental Nutritional Assistance Program)” in 2013 or 2014?
If yes, please identify which family member here ________________________________________________________

C. Student’s Tax Forms and Income Information (all applicants)

1. Check only one box below. Tax transcripts include the 2014 IRS transcript from filing Form 1040, 1040A, 1040EZ, and a tax return from Puerto Rico. Tax transcripts can be obtained by going to www.irs.gov/transcript or calling the IRS at 1-800-908-9946.
   - ☐ Check here if you are attaching a copy of your tax transcript.
   - ☐ Check here if you successfully utilized the IRS data retrieval tool online at www.FAFSA.gov.
   - ☐ Check here if you will not file and are not required to file a 2014 U.S. Income Tax Return. If you earned 
     wages in 2014, you must submit all W2 forms.

2. If your spouse did not file and is not required to file a 2014 Federal income tax return, list below your spouse’s employer(s) and any income received in 2014 (*You must provide the W-2 form or other earnings statements with this form*).  

<table>
<thead>
<tr>
<th>Sources</th>
<th>2014 Income</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
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<tr>
<td></td>
<td>$</td>
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<tr>
<td></td>
<td>$</td>
</tr>
</tbody>
</table>
D. Spouse’s Tax Forms and Income Information (if student is married)

1. Check only one box below. Tax transcripts include the 2014 IRS transcript from filing Form 1040, 1040A, 1040EZ or a tax return from Puerto Rico. Tax transcripts can be obtained by going to www.irs.gov/transcript or by calling the IRS at 1-800-908-9946.
   - Check here if you are attaching a copy of your spouse’s joint tax transcript.
   - Check here and attach spouse’s tax transcript if your spouse filed a separate tax return.
   - Check here if you and your spouse filed jointly and utilized the IRS data retrieval tool online successfully at www.FAFSA.gov.
   - Check here if your spouse will not file and is not required to file a 2014 U.S. Income Tax Return.
   
   If your spouse earned wages in 2014, you must submit all W2 forms.

2. If your spouse did not file and is not required to file a 2014 Federal income tax return, list below your spouse’s employer(s) and any income received in 2014 (You must provide the W-2 form or other earnings statements with this form).

<table>
<thead>
<tr>
<th>Sources</th>
<th>2014 Income</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>$</td>
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<tr>
<td></td>
<td>$</td>
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<td></td>
<td>$</td>
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</tbody>
</table>

E. Additional Financial Information and Untaxed Income

Use the tables below to report annual (not monthly) amounts as indicated on your 2014 TAX RETURN. Tax returns include the 2014 IRS Form 1040, 1040A, 1040EZ, a tax return from Puerto Rico or a foreign income tax return. If the amount is zero, or the question does not apply to you, write “0”, do not leave blank.

<table>
<thead>
<tr>
<th>STUDENT’S 2014 Additional Financial Information</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Education Credits (Hope and Lifetime Learning tax credits) from IRS Form 1040 – line 50 or 1040A – line 33.</td>
<td>$</td>
</tr>
<tr>
<td>b. Child support paid by you or your spouse due to divorce or separation or as a result of a legal requirement. You MUST complete the child support paid statement. (download at <a href="http://www.hofstra.edu/sfsforms">www.hofstra.edu/sfsforms</a>)</td>
<td>$</td>
</tr>
<tr>
<td>c. Taxable earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.</td>
<td>$</td>
</tr>
<tr>
<td>d. Grant and scholarship aid reported to the IRS in your adjusted gross income. Includes AmeriCorps benefits (awards, living allowances and interest accrual payments), as well as grant and scholarship portions of fellowships and assistantships (DO NOT include Hofstra scholarships or grants).</td>
<td>$</td>
</tr>
<tr>
<td>e. Combat pay or special combat pay.</td>
<td>$</td>
</tr>
<tr>
<td>Only enter the amount that was taxable and included in your adjusted gross income.</td>
<td></td>
</tr>
<tr>
<td>f. Earnings from work under a cooperative education program offered by a College (DO NOT include earnings from any Hofstra work program).</td>
<td>$</td>
</tr>
</tbody>
</table>
STUDENT'S 2014 Untaxed Income

a. Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings), including, but not limited to, amounts reported on the W-2 forms in Boxes 12a through 12d. Codes D, E, F, G, H and S. Don’t include amounts reported in code DD (employer contributions toward employee health benefits).

b. IRA deductions and payments to self-employed qualified plans from IRS Form 1040 – line 28 + Line 32 or 1040A – line 17.

c. Child support received for all children in your household.
(DO NOT include foster care or adoption payments).

d. Tax exempt interest income from IRS Form 1040 - line 8b or 1040A Line 8b.

e. Untaxed portions of IRA distributions from IRS Form 1040 – lines 15a minus 15b or 1040A - lines 11a minus 11b. Exclude ROLLOVERS. If negative, enter “0”.

f. Untaxed portions of pensions from IRS Form 1040 lines 16a minus 16b or 1040A lines 12a minus 12b. Exclude ROLLOVERS. If negative, enter “0”.

g. Housing, food and other living allowances paid to members of the military, clergy and others (including cash payments and cash value of benefits). Don’t include the value of on-base military housing or the value of a basic military allowance for housing.

h. Veterans non-education benefits such as Disability Death Pension or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.

i. Other untaxed income not reported elsewhere on this form, such as workers’ compensation, disability, etc. Also include the health and savings account deduction from IRS form 1040, line 25 and the first-time homebuyer tax credit from IRS form 1040, line 59b. DO NOT INCLUDE student aid, earned income credit, child tax credit, welfare payments, untaxed Social Security benefits, Supplemental Security Income, Workforce Investment Act educational benefits, on base military housing or a military housing allowance, combat pay, (if you are a not a tax filer), benefits from flexible spending arrangements (e.g. cafeteria plans), foreign income exclusion or credit for federal tax on special fuels.

j. Money received, or paid on your behalf (e.g. bills), in 2014, not reported elsewhere on this form.

☐ Yes ☐ No Were you (your household) supported in 2014 by any form of income reported below? (do not include income already reported somewhere else on this form) Untaxed student financial aid, welfare, any kind of Social Security benefits, Workforce Investment Act educational benefits, combat pay (if you are a not a tax filer), benefits from flexible spending arrangements (e.g. cafeteria plans), foreign income exclusion or credit for federal tax on special fuels

F. Sign this Worksheet

Each person signing this form certifies that all the information reported on it is complete and correct. If married, spouse’s signature is optional.

Student  Date

Spouse  Date

You may submit the verification and requested forms to

Office of Student Financial Services
202 Memorial Hall
126 Hofstra University
Hempstead, NY 11549-1260
FAX: 516-463-4936 (Please make sure the student’s ID# appears on every page)
Email: studentfinancialservices@hofstra.edu

Questions? Please call 516-463-8000 and a Student Financial Services Representative will assist you.