

Name _____ RCC ID _____

This appeal may be submitted if you, your spouse, and/or parent(s) have experienced a significant reduction of income since the 2023 tax year. For requests related to other income adjustments or circumstance changes, use the Special Circumstances Appeal form.

Only submit this form if all these apply:

- You have already completed the 25/26 FAFSA and we have it on file at RCC
- You have submitted any additional information requested by RCC FinAid needed to process your FAFSA
- The loss in household income is approximately 10% or more
- Federal taxes have already been filed for the year you would like reviewed

Complete all sections of this appeal and attach the required documentation. Incomplete appeals will not be reviewed. Submission of this appeal does not guarantee a change or increase to your award. Please allow up to four weeks for review/processing of this appeal and be sure to check your email for any additional information or documentation requests.

A. Individual Requesting Appeal: Mark either or both options

Parent Income Adjustment | Student/Spouse Income Adjustment

B. Income Year to be Reviewed: Check *one*

2024 (submitted **before** Jan. 1, 2026) | 2025 (submitted **on or after** Jan. 1, 2026)

C. Write a detailed description on a separate sheet of paper of the circumstances that affected your/your family's financial situation for the 12-month period selected above. Include specific dates.

D. Required Documentation: For Dependent students, **both** documents needed for student & parent(s).

For Independent students, **both** documents needed for student & spouse (if applicable)

- Copy of the applicable 2024 or 2025 [IRS Tax Return Transcript](#)(s) **AND**
- Copy of 2024 or 2025 [IRS Wage and Income Transcript](#)(s) for all applicable household members, even if taxes were not required to be filed

Student Certification: *The information I have provided is true and complete to the best of my knowledge and reflects a more accurate report of my household's ability to contribute to my 25/26 college expenses. I understand if I purposely give false, incomplete, or misleading information, I may be fined and face penalties.*

Student Signature _____ Date _____

Parent Signature (if applicable) _____ Date _____

TO SUBMIT DOCUMENTS: email your FinAid Advisor or come in-person to [Rogue Central](#) for fastest processing. [Find your FinAid Advisor](#) on our website.

Physical copies can be mailed to: 3345 Redwood Hwy | Grants Pass, OR 97527