PARENT REEVALUATION REQUEST

Student Name	Reed ID
Parent Name(s)	Parent Email

By completing and submitting this form, you are requesting the Reed College Financial Aid Office to reevaluate your family financial situation based on unusual, special, or changed circumstances. The financial aid office reviews such requests on an individual basis and will respond in writing with the results of this review. <u>Submit</u> this form, along with a letter of explanation and your supporting documentation, to the financial aid office ONLY if you have already received a financial aid package from Reed College.

<u>**Part I.</u>** LETTER OF EXPLANATION: Submit a letter explaining the change in circumstances for your family and/ or additional information you would like considered.</u>

<u>**Part II.</u> DOCUMENTATION:** Unless already submitted, all requests for reconsideration must be accompanied by</u>

both your family's **2022 and 2023 IRS Income Tax Return**, as well as all **2022 and 2023 W-2s**. In addition, if your request for reevaluation of aid eligibility is based on:

- Involuntary loss of employment (parent is terminated, fired, laid off), provide the following: (1) a copy of the notice of termination from the employer and a copy of the employment decision from the Employment Division or its designee, (2) a copy of the final pay stub, and (3) statement of eligibility for unemployment compensation. *If your spouse employed, provide a copy of your spouse's most recent pay stub.*
- Loss of income due to a disabling illness or injury, provide a letter from the doctor which includes the date(s) you or your spouse were treated for the illness/injury and a brief description of how the illness/injury interfered with the ability to work.
- Involuntary reduction in earned income or reduction/elimination of child support, unemployment compensation, Social Sec benefits, etc. Provide documentation from the employer or agency indicating the date of the change and the revised amount.
- Separation or divorce after the 2024-25 financial aid applications are filed: provide the date of separation/divorce. Also provide updated statement of the current number in the household supported by the parent, including the student, and the number of excluding the parent, that will attend college at least half-time in 2024-25. Do not include the income or taxes to be paid information of the non-custodial parent in Part III.
- Death of a parent who completed the 2024-25 financial aid applications for the student, provide the name of the parent and the date of death. Also provide an updated statement of the current number of family members you support and the number of those who will attend college at least halftime in 2024-25.
- You may submit documentation to the Financial Aid Office's Secure Portal: <u>filerobot.reed.edu/groups/finaid</u>

◆ 3203 SE WOODSTOCK BLVD PORTLAND, OR 97202 ◆

◆ P:(503)777-7223 ◆ F:(503)788-6882 ◆ FINANCIAL.AID@REED.EDU◆

<u>**Part III.</u> PARENT INCOME INFORMATION**: To be completed by student's parents(s). Complete all lines, providing the best estimate of **expected** *(i.e.* anticipated, likely) income. Use "o" if the answer is none or not applicable. **Do not leave questions blank**.</u>

2024 expected income and benefits:

Parent 1 gross wages (Jan. 1, 2024–Dec. 31, 2024)	\$
Parent 2 <u>gross</u> wages (Jan. 1, 2024–Dec. 31, 2024)	\$
Interest and dividend income	\$
Net income from business or farm	\$
Net rental income	\$
Pensions, annuities, royalties, partnerships, estates, trusts, retirement distributions, etc.	\$
Unemployment compensation (if o, explain)	\$
Other <i>taxable</i> income, identify source:	\$
Social Security and/or Veterans benefits	\$
Child Support received for all children	\$
Housing and/or living allowances	\$
Your contributions to tax-deferred retirement plans	\$
Untaxed disability income	\$
Other <i>untaxed</i> income, identify source:	\$

PART IV. 2024-2025 ANTICIPATED ACADEMIC YEAR EARNINGS

Parent 1 gross academic year wages, July 1, 2024 – June 30, 2025	\$
Parent 2 <u>gross</u> academic year wages, July 1, 2024 – June 30, 2025	\$

<u>Part V.</u> AUTHORIZATION AND SIGNATURE: All of the information included in this form is true and complete to the best of my knowledge. I agree to provide additional documentation of the above statements if requested to do so. I also agree to update the financial aid office if these projections change at any time during 2024.

Parent 1 Signature Date Date

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