



## FINANCIAL AID APPLICATION AND INCOME ADJUSTMENT PROCESS

1. The Iowa Lakes Community College Financial Aid Office will make the appropriate adjustments and submit to the Department of Education for processing.
2. After your financial aid information has been confirmed, you will receive a financial aid award letter with instructions on additional requirements to complete the financial aid process.
3. Submit this form along with all requested documentation to:

**Estherville Students:**  
Iowa Lakes Community College  
Financial Aid Office  
300 S. 18th Street  
Estherville, IA 51334

**Emmetsburg, Spencer, Algona, Spirit Lake Students:**  
Iowa Lakes Community College  
Financial Aid Office  
3200 College Drive  
Emmetsburg, IA 50536

**Student Name:** \_\_\_\_\_ **Student ID #:** \_\_\_\_\_

This will assist you in requesting a review of your financial aid eligibility because of changes in your financial circumstances not addressed on your original financial aid application.

### CERTIFICATION STATEMENT

All of the information provided by the undersigned is true and complete to the best of my/our knowledge. I/we realize that underestimating projected income could result in reduced eligibility, repayment of aid, or both. I/we further understand that purposely giving false or misleading information to obtain federal student financial aid may subject me/us to fines or other penalties. The student (and at least one parent, if parental information is given) must sign below, or this form will be returned unprocessed.

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

\_\_\_\_\_  
Address City State Zip Phone Number

\_\_\_\_\_  
Parent Signature (dependent student only) Date

### Are you or your parent/s a Dislocated Worker? **YES – Go to Section I**

Per the U.S. Department of Education, a person may be considered a dislocated worker if he or she:

- is receiving unemployment benefits due to being laid off or losing a job and is unlikely to return to a previous occupation.
- has been laid off or received a lay-off notice from a job.
- was self-employed but is now unemployed due to economic conditions or natural disaster.
- is a displaced homemaker. A displaced homemaker is generally a person who previously provided unpaid services to the family (e.g., a stay-at-home mom or dad), is no longer supported by the husband or wife, is unemployed or underemployed, and is having trouble finding or upgrading employment.

### Did you or your parent/s resign from work? **YES – Go to Section II**

If a person quits work, generally, he or she is not considered a dislocated worker even if, for example, the person is receiving unemployment benefits.

**Section I:** Please provide the listed documentation below. This documentation must be attached to this form when returned to the Financial Aid Office.

Date employment was terminated: \_\_\_\_\_

Copy of your Termination Notice

Copy of your severance benefits

Copy of your unemployment benefit notice

Copy of 2021 Tax Transcript and W-2's. Call the Internal Revenue Service at 1-800-908-9946 to request a tax transcript.

**Section II – Expected Income Sources**

Please provide income projections/estimates for the next 12 months. Include income already received as well as what is expected to be received.

- 1. Actual (latest paycheck stub) \$ \_\_\_\_\_
- 2. Actual ( Spouse's latest paycheck stub) \$ \_\_\_\_\_
- 3. Father's income **(dependent student only)** \$ \_\_\_\_\_ expected \_\_\_\_\_
- 4. Mother's income **(dependent student only)** \$ \_\_\_\_\_ expected \_\_\_\_\_
- 5. Child Support \$ \_\_\_\_\_ expected \_\_\_\_\_
- 6. Workers Compensation \$ \_\_\_\_\_ expected \_\_\_\_\_
- 7. Disability \$ \_\_\_\_\_ expected \_\_\_\_\_
- 8. Gifts \$ \_\_\_\_\_ expected \_\_\_\_\_
- 9. Cash, savings, and checking account \$ \_\_\_\_\_
- 10. Veterans Benefits \$ \_\_\_\_\_
- 11. Value of real estate/investments \$ \_\_\_\_\_
- 12. Debt owed against real estate/investments \$ \_\_\_\_\_

**Personal Statement:** Please provide a written explanation of your circumstances plus any additional information you feel is relevant to help us evaluate your situation.

**Non-discrimination/Equal Opportunity Statement**

It is the policy of Iowa Lakes Community College not to discriminate on the basis of race, color, national origin, sex, disability, age (employment), sexual orientation, gender identity, creed, religion and actual or potential parental, family or marital status in its programs, activities, or employment practices as required by the Iowa Code §§216.6 and 216.9, Titles VI and VII of the Civil Rights Act of 1964 (42 U.S.C. §§ 2000d and 2000e), the Equal Pay Act of 1973 (29 U.S.C. § 206, et seq.), Title IX (Educational Amendments, 20 U.S.C §§ 1681 – 1688), Section 504 (Rehabilitation Act of 1973, 29 U.S.C. § 794), and Title II of the Americans with Disabilities Act (42 U.S.C. § 12101, et seq.).

If you have questions or complaints related to compliance with this policy, please contact Kathy Muller, Equity & Title IX Coordinator, 19 South 7th Street, Estherville, IA 51334, 712.362.0433, kmuller@iowalakes.edu, or the Director of the Office for Civil Rights U.S. Department of Education, John C. Kluczynski Federal Building, 230 S. Dearborn Street, 37th Floor, Chicago, IL 60604-7204, Telephone: (312) 730-1560 Facsimile: (312) 730-1576, TDD 800-877-8339 Email: OCR.Chicago@ed.gov.