☐ Most recent paystub showing year-to-date earnings

☐ Statement of any benefit received as a result of unemployment (ex. CA Keep Your Home Benefits)

☐ Unemployment benefits statement

☐ Statement of severance pay

S

## 2021-2022 PROJECTED YEAR INCOME PETITION - STUDENT

Name:	Last First		UID#
☐ Ch	eck this box if you plan to enroll for S	Summer	2021 (a separate Summer Aid Application is Required)
this ap			r income to be significantly less than 2019, you may filuation will be retroactive to the beginning of the 202
Examp	oles of eligible circumstances include:		
Lo	ss of full-time employment, ss of other income (SSI benefits, unemploy ss of income due to divorce, legal separatio		
Studen pected must b	2021 income if the business is still operati	ned throu ional. Yo anscript.	igh self-employment are not allowed to project their e our appeal will have to be based upon the actual loss as However, if your business is non-operational by Decer
In ord	er to complete this form, please follow th	ie steps o	utlined below:
STEP	All 2019 W2's and/or all 1099's ( <b>mask</b>	the first	five numbers of all SSNs)
<u>STEP</u>	2: Please select the option(s) that best fit yo	our circur	nstances and include <u>ALL</u> documentation specified:
	LOSS OF EMPLOYMENT		INCOME EXCLUSION FOR SPOUSE DUE TO DIVORCE OR LEGAL SEPARATION*
	Signed termination letter from employer		☐ Judgment of Divorce with court date-stamped

(CA FL-180 or equivalent)

☐ Legal Separation Agreement

☐ Property Declaration (CA FL-160 or equivalent)

\*Proof of separate residences may be required

LOSS OF INCOME (i.e. CHILD SUPPORT, DISA- BILITY, UNEMPLOYMENT)	DEATH OF SPOUSE
☐ Letter from agency verifying benefits have been terminated (Must include amount paid year-to-date and termination date) ☐ For loss of child support, please provide court documentation verifying amount received per month and termination date or a statement from the Department of Child Support Services.	☐ Copy of Death Certificate ☐ Documentation of life insurance payments ☐ Documentation of social security survivor benefits, widow's pension, etc.

<u>STEP 3</u>: Please itemize your monthly and yearly projected sources of income from January 1, 2021 to December 31, 2021. <u>Do not leave any fields blank, if not applicable please enter \$0.</u>

TYPE OF PROJECTED INCOME AND RESOURCES	PER MONTH	PER YEAR
Gross Income from employment - Student		
Gross Income from employment - Spouse		
Interest and dividend income		
Unemployment benefits		
Worker's Compensation and/or Disability benefits		
Child support received		
Living allowances paid to military, clergy and others		
Veteran non-educational benefits		
Foreign income		
Social Security benefits		
Temporary Assistance for Needy Families (TANF)		
SNAP (formerly known as Food Stamps)/WIC/Subsidized Housing		
Other (spousal support, etc. Please specify):		
TOTAL INCOME AND RESOURCES	\$	\$

## **STEP 5: VERIFICATION OF HOUSEHOLD SIZE AND NUMBER IN COLLEGE**

List your dependents for the 2021-2022 academic year. Include yourself, your spouse, and your dependent children. Include other people only if they will live with and receive more than half of their support from you during the entire period from 07/01/21 to 06/30/22. If you are including people other than immediate family members, please include a statement explaining the reason and extent to which you support the individual(s).\*

\*Please Note: You may be required to submit to submit additional documentation based on the information provided in your statement. If no statement is provided we may use discretion to revise the number in the household and /or college.

NAME OF FAMILY MEMBER	RELATIONHIP TO STUDENT	AGE (AS OF 12/31/21)	NAME OF ELIGIBLE COLLEGE** ATTENDED AT LEAST HALF TIME DURING 21-22	GRADUATE STUDENT? Y/N
	Self		University of California, Los Angeles	
**College must be sligible to m	outicinate in Title IV on	ograma Dlagg	e do not abbreviate the name of the college.	
CERTIFICATION STAT I certify that all information repoprevent me from receiving finantice is required to verify the infinto account. If any discrepancial in I understand that certain a	CEMENT:  orted on this form is tru  ncial aid in future acade  cormation reported on r  es are found, my file a  awards (State, Universi	ne. Purposely fa emic years. I u my 2021-2022 and award will ty grants, and	alsifying information may lead to a cancellation of inderstand that the UCLA Financial Aid and Sci financial aid application before any projections be updated, which may result in reduction of Work-Study) are subject to availability of fund event funding has been exhausted.	holarships of- can be taken eligibility for
Student Signature*			Date	
Spouse's Signature* *Electronic signatures are	not acceptable		Date	

Submit all documents as one complete packet to the Financial Aid & Scholarships Office

HOW TO SUBMIT			
ONLINE: Log on to MyUCLA> click Finances and Jobs tab> under Financial Aid and Scholar- ships click> View All Documents> Click on Appeal > Attach form as necessary.	<u>FAX:</u> Fax: 310-267-4143 Attn: UCLA Financial Aid and Scholarships		