Randolph-Macon College

Office of Financial Aid

Re-evaluation of Financial Aid Form

Student Name: _____
Last First M

RMC ID#:

_____

Randolph-Macon College is committed to providing need-based assistance to qualifying students. The Financial Aid office recognizes that some families experience changes that are not reflected in the Free Application for Federal Student Aid (FAFSA). ***Please note that no request for a re-evaluation will be considered without a FAFSA, and that submission of this form does not guarantee any adjustment to a student's aid package.*** *Complete Sections 1-4 and be sure to submit the requested documentation.*

SECTION 1: Please check the appropriate box(es) concerning your reason(s) for requesting a re-evaluation of assistance:

SPECIAL CIRCUMSTANCE	DETAILS	REQUIRED DOCUMENTATION
❑ Loss of Employment	Your parent(s) or your earned income in 2026 or 2027 will be significantly less than in 2025 as reported on the FAFSA.	▪ Copy of last pay stub showing year-to-date earnings. ▪ Termination/layoff notice from employer, severance package, and a benefit notice from the employment office.
❑ Loss of Taxable/Untaxed Income such as alimony, business and farm income, capital gains, child support, pensions, annuities, social security, worker's compensation and/or other.	Your parent(s) or you received benefits in 2025 which have ceased or been reduced in 2026 or in 2027.	▪ Documentation from agency stating total amount received in 2025 or 2026 with termination date. ▪ Documentation of updated 2026 or 2027 income amount.
❑ Separation or Divorce	Your parents or you have separated or divorced AFTER submitting the FAFSA.	▪ A copy of the divorce decree or separation agreement or proof of separate residences.
❑ Death of Parent or Spouse	A parent or spouse has died AFTER submitting the FAFSA.	▪ Copy of death certificate or obituary.
❑ Other Financial Difficulty/Unusual Expense such as funeral expenses, unreimbursed medical expenses, etc.		▪ Complete Section 2 and 4. ▪ Submit supporting documentation, if possible.

SECTION 2: Explanation of circumstances in detail: (Attach additional paper/statement, as needed)

SECTION 3: Report income and benefits from January 1 – December 31 for all individuals on the FAFSA. To verify income, please send all student and parent 2025 and 2026 signed federal tax returns, tax schedules 1, 2, 3, and W-2 statements.

Taxable Income	*Actual Income 2025*	*Actual Income 2026*	*Estimated Income 2027*
Father/Stepfather Wages, Salaries, (Gross Amount)			
Mother/Stepmother Wages, Salaries, (Gross Amount)			
Interest and Dividend Income			
Net Income/Loss from Bus. &/or Farm (Sched. 1, 2, 3)			
Severance Pay			
Vacation or Sick Pay			
Stock Options			
Capital Gain/Loss			
Rental Income/Loss			
Taxable Social Security Benefits			
Alimony Received			
Unemployment Compensation			
Pensions/Annuity/IRA Withdrawals			
Income from Royalties, Partnerships, Estates and Trusts			
Other			
Total Child Support that You RECEIVED for all children			

SECTION 4: CERTIFICATION

The information provided on this form is true and complete to the best of my knowledge. I agree to provide additional documentation if requested. I further agree to notify your office of any error or omission. I understand that failure to comply with this agreement could result in forfeiture of financial aid. A parent must sign if updating parent information. Student must sign if updating student information.

_____ _____ _____ _____

Student Signature (not electronic or digital) | Date | Parent Signature (not electronic or digital) | Date

_____

Daytime Phone Number

How much additional aid are you requesting? $_____