

2017-2018 Change of Financial Situation

Section C – Actual Income for 2016 (Complete for reasons A, B, C, D, and E)

Actual Income for the 2016 calendar year (January 1, 2016 – December 31, 2016)

Instructions: Answer EACH line with an amount or “zero” if it does not apply. If you checked the letter D, please give only the information of the custodial parent if Dependent, or if Independent, yourself. If you checked letter E, please give only the information of the surviving parent if Dependent, or if Independent, yourself. If Independent, and married, please include your and your spouse’s income. **You will need to do this for each person whose financial data is included on the FAFSA, except as noted per the instructions above for letter D and E.**

Types of Untaxed Income	Father	Mother	Student	Student’s spouse
Housing allowance for military or clergy				
Workers compensation <i>Provide copy of monthly statement</i>				
Untaxed disability income <i>Provide copy of monthly statement</i>				
Child support received for all members of your household				
Untaxed pension <i>Provide copy of monthly statement</i>				
Other untaxed income <i>(List the source)</i> _____				

Anticipated Income for 2017 (Complete for reasons A, B, C, D, and E)

Anticipated Income for the 2017 calendar year (January 1, 2017 – December 31, 2017)

Instructions: Answer EACH line with an amount or “zero” if it does not apply. If you checked the letter D, please give only the information of the custodial parent if Dependent, or if Independent, yourself. If you checked letter E, please give only the information of the surviving parent if Dependent, or if Independent, yourself. If Independent, and married, please include your and your spouse’s anticipated income. **You will need to do this for each person whose financial data is included on the FAFSA, except as noted per the instructions above for letter D and E.**

Taxable Income From Wages	Father	Mother	Student	Student’s spouse
Document gross wages earned through today’s date _____ <i>Provide copy of most recent pay statement</i>				
Estimate anticipated wages from today’s date through Dec. 31, 2017 <i>Please document how calculated</i>				
Other Taxable Income	Father	Mother	Student	Student’s spouse
Unemployment income to date and anticipated in 2017 <i>Provide copy of monthly statement</i>				
Severance, paid time off, vacation pay out (if not included in gross wages)				
Taxable pension <i>Provide copy of monthly statement</i>				
Taxable income from 401K disbursements or other existing assets <i>Include year to date disbursements and anticipated disbursements</i>				
Other taxable income <i>(List the source)</i> _____				
Types of Untaxed Income	Father	Mother	Student	Student’s spouse
Housing allowance for military or clergy				
Workers compensation <i>Provide copy of monthly statement</i>				
Untaxed disability income <i>Provide copy of monthly statement</i>				
Child support received for all members of your household				
Untaxed pension <i>Provide copy of monthly statement</i>				
Other untaxed income <i>(List the source)</i> _____				

Section D – Statement of Certification

I/we certify that the information provided on this form and any attachments are true and correct. Additionally, it is understood that I/we must notify the Office of Student Financial Aid if the situation outlined in this request changes.

Student Signature

Date

Parent’s Signature (if dependent)

Date

ENTER YOUR UIN →

--	--	--	--	--	--	--	--	--	--