



**Please Note:** Complete the following charts listing all income from January 2009 – December 2009. You must accurately complete the following charts before your request will be reviewed. (If you did not provide parental information on the FAFSA application, it will **not** be needed on this form.)

<b><u>Estimated 2009 Taxable Income</u></b>	<b><u>Father</u></b>	<b><u>Mother</u></b>	<b><u>Student</u></b>	<b><u>Spouse</u></b>
Yearly wages, salaries, and tips	\$ _____	\$ _____	\$ _____	\$ _____
Yearly severance pay	\$ _____	\$ _____	\$ _____	\$ _____
Yearly pensions and annuities	\$ _____	\$ _____	\$ _____	\$ _____
Yearly interest and dividends	\$ _____	\$ _____	\$ _____	\$ _____
Yearly business & farm income	\$ _____	\$ _____	\$ _____	\$ _____
Yearly capital gains	\$ _____	\$ _____	\$ _____	\$ _____
Yearly rents from rental property	\$ _____	\$ _____	\$ _____	\$ _____
Yearly alimony	\$ _____	\$ _____	\$ _____	\$ _____
Yearly unemployment benefits	\$ _____	\$ _____	\$ _____	\$ _____
Yearly other taxable income	\$ _____	\$ _____	\$ _____	\$ _____
<b>Total 2009 Taxable Income</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>

<b><u>Estimated 2009 Untaxed Income</u></b>				
Yearly payments to retirement plans	\$ _____	\$ _____	\$ _____	\$ _____
Yearly child support for all children	\$ _____	\$ _____	\$ _____	\$ _____
Yearly payments to pension/savings	\$ _____	\$ _____	\$ _____	\$ _____
Yearly work-study earnings	\$ _____	\$ _____	\$ _____	\$ _____
Yearly veteran's benefits	\$ _____	\$ _____	\$ _____	\$ _____
Yearly social security benefits	\$ _____	\$ _____	\$ _____	\$ _____
Yearly retirement income	\$ _____	\$ _____	\$ _____	\$ _____
Yearly disability income	\$ _____	\$ _____	\$ _____	\$ _____
Yearly workers compensation	\$ _____	\$ _____	\$ _____	\$ _____
Yearly AFDC or ADC	\$ _____	\$ _____	\$ _____	\$ _____
Yearly living and housing allowance for clergy, military, etc. (Includes BAS/BAQ cash allotments)	\$ _____	\$ _____	\$ _____	\$ _____
Yearly financial support paid on the student's behalf	\$ _____	\$ _____	\$ _____	\$ _____
Yearly other untaxed income	\$ _____	\$ _____	\$ _____	\$ _____
<b>Total 2009 Untaxed Income</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>

**Please initial to indicate your understanding of the following statements:**

- \_\_\_\_ I understand that I must inform the Financial Aid Office if my circumstances change for the current year.
- \_\_\_\_ I understand that this process could take 4-6 weeks before I receive a decision.
- \_\_\_\_ I understand I may be required to repay any and all financial aid received as a result of the special circumstances process if I falsify information.
- \_\_\_\_ I understand that additional information may be required after initial documentation is submitted.

\_\_\_\_\_  
Signature of Student                      Date                      Parent/Spouse Signature                      Date

