Used for Academic Year 2024-2025

| Student Name:                       | Last                             | First   | ID#  |                   |
|-------------------------------------|----------------------------------|---|--|-------------------|
| review your FAI<br>our office using | SA for possible ch               | anges, you will need t                            | come to be significantly less than 2022 and are a<br>to complete this form. Actual income figures wil<br>Please allow a minimum of 8 weeks from the da | l be verified by  |
| I. Ple                              | ase indicate who t               | he form is being com                              | pleted for:  |                   |
| Pare                                | nt                               |   | Student  |                   |
|                                     | ase indicate below<br>propriate. | which most accurate                               | ely describes your situation. You may indicate m   | ore than one if   |
| _                                   |                                  |   | ent. Date of change:<br>as well as most recent pay stubs.  | Attach proof of   |
| O<br>Atta                           |                                  | or benefits received in<br>ency providing benefit | n 2022 have ended. Date of change:<br>ts.  |                   |
| O<br>Pro                            | Death of Parent o                | •   | mation was included on the 2024-2025 FAFSA.  |                   |
|                                     | •                                | py of the divorce dec                             | ter applying for financial aid. Date: tree or letter from a lawyer indicating the date yo  | _<br>ou filed for |
| O<br>exp                            | •                                |   | Please note this must be a <b>one-time</b> occurrence tution and copy of taxes must be submitted.  | :hat is not       |
| Ве                                  | sure to com                      | olete the proje                                   | cted year income on the reverse s  | side.             |

| Proi | iected | Year  | Income    | for | 2024 |
|------|--------|-------|-----------|-----|------|
| 1 10 | CCLCU  | ı Caı | IIICOIIIC | 101 | 2024 |

| Student Name | / ID # |  |
|--------------|--------|--|
|              |        |  |

- Please be certain that you provide information for all categories below, not just the types of income that has changed.
- Actual figures will be verified using the documentation supplied. Additional information may be requested as needed.

| Estimated Income for 2024                    | Per Month | Per Year |
|--|-----------|----------|
| Father/step-father work income               |           |          |
| Mother/step-mother work income               |           |          |
| Student work income                          |           |          |
| Student spouse work income                   |           |          |
| Alimony                                      |           |          |
| Income from Business or Farm                 |           |          |
| Unemployment compensation                    |           |          |
| Interest and Dividend Income                 |           |          |
| IRA/Pension/Annuity distribution             |           |          |
| Other taxable income                         |           |          |
| Child support received                       |           |          |
| Untaxed pensions                             |           |          |
| Payments to IRA/401K/etc.                    |           |          |
| Education tax credits                        |           |          |
| Workers' compensation                        |           |          |
| Social Security benefits                     |           |          |
| Death benefits / Cash Payments               |           |          |
| Cash / Gifts paid on your behalf             |           |          |
| Living allowance received by military/clergy |           |          |
| Veteran non-education benefits               |           |          |
| Foreign income                               |           |          |
| SNAP / TANF / WIC                            |           |          |
| Housing subsidies                            |           |          |
| Other untaxed income                         |           |          |
|  | <u> </u>  |          |

| <b>Certification:</b> All of the information on this form is true and complete to the best of my knowledge. |      |  |  |  |
|---|------|--|--|--|
| Student Signature   | Date |  |  |  |
| Parent Signature  | Date |  |  |  |