

Date: _____

SS#: _____

Dear Student/Parent(s):

In order to re-evaluate your application for financial aid using your projected family income; please provide the following information:

() Parents and/or () student/spouses income and/or benefits for the period of
 7 / 1 / 10 to 6 / 30 / 11 .

Total income and/or benefits for this period will be:

<u>Source**</u>	<u>Amount**</u>
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
<u>Total</u>	\$ _____

****Please see reverse side for required documentation****

Student's Signature

Date

Spouse's Signature

Date

Mother's Signature

Date

Father's Signature

Date

****Required Documentation****

1. Verification of previous year's income. This would include a signed copy of the 2009 Federal tax return with all pages, schedules and W-2 forms.
2. Projected year income form estimating total income from 7/1/10 through 6/30/11 (complete reverse side).
3. Verification of loss of income, such as a letter from previous employer, notice of termination, notice of loss of benefits, social security, social services, unemployment, etc.
4. Verification of the amount(s) of income and the source(s) as reported on the reverse side of this form.

Please attach the proper documentation (as indicated above) to this form, when completed, and return to our office