

Select the box that best describes your situation and provide the requested documentation:

One-time Income Payment: *You or your parent(s) received a one-time income payment in 2024 (may include pension or IRA distribution, inheritance, or bonus.)*

Additional required documentation:

- 1.) Documentation of one-time payment
- 2.) Explanation of why one-time payment is not available for educational purposes
*Consumer debt cannot be considered when determining a family's ability to contribute to a student's education

Loss of Untaxed/Taxable income: *Child Support, Alimony, Workers Comp., social security, reduced income etc.*

List benefit or Untaxable/Taxable income source: _____

Date of Benefit or Income Loss: _____ Amount received for 2024: _____

Additional required documentation:

Termination letter from provider/agency.

Separation/Divorce after the FAFSA was submitted: Date of Separation/Divorce: _____

Additional required documentation:

- 1.) Separation or divorce papers
- 2.) All 2024 W-2's for both parents

Death of parent(s)

Name of Deceased: _____ Date of Death: _____

Relationship to Student: _____

Additional required documentation:

- 1.) Proof of death
- 2.) All 2024 W-2 for parent(s)

Private School Tuition paid for legal dependents

Elementary/Secondary school tuition expense totaling \$ _____ for present year.

Name of child/children: _____

Additional required documentation:

A statement on school letterhead, indicating the amount paid minus scholarships/tuition assistance.

Excessive Medical or Dental Payments: *Payments must be those unreimbursed, do not include tax-exempt insurance premiums or expenses paid by medical saving through payroll deductions.*

Additional required documentation:

- 1.) Copy of Schedule A from 2024 Federal Tax Return and/or
- 2.) Proof of medical expenses paid from medical provider, not covered by insurance company

Loss of Employment: i.e. layoff, termination, retirement *Only if 2026 income will be substantially lower than 2024 income*

(check one) ___Mother ___Father ___Student Date of Loss: ____/____/____

Additional required documentation:

- 1.) A letter on letterhead from previous employer indicating last day worked
- 2.) Last paystub showing year to date earnings or letter from employer indicating year to date earnings
- 3.) Unemployment Benefits Determination Statement, severance package
- 4.) Most current paystub, if employed

Other unusual circumstances

Additional required documentation:

- 1.) Detailed statement explaining circumstances
- 2.) Supporting documentation

ESTIMATE OF 2026 INCOME

Provide the BEST estimate of your and your parents' income if a dependent student; or student and spouse income if independent and married - from all sources for the period of January 1, 2026, through December 31, 2026. *You must answer each of the following lines.* Report "0" if nothing is received. *Be sure to list figures that encompass the entire 2026 calendar year* – it may be necessary to project or estimate a portion of this income. Submit the most recent paystub if employed.

Estimated 2026 Taxable Income:	Parent(s)		Student/Spouse
Wages, salaries, tips (including severance pay)	Father \$	_____	Student \$ _____
	Mother \$	_____	Spouse \$ _____
Pensions and annuities		_____	_____
Interest/dividend income/capital gains		_____	_____
Business or farm income:		_____	_____
Alimony		_____	_____
Unemployment		_____	_____
Any other taxable income (deductible IRA distributions, refunds, S Corp, trusts, etc. Specify source: _____)		_____	_____
Total 2026 Taxable Income:		_____	_____
 Estimated 2026 Untaxed Income:		_____	_____
Social Security benefits received for all household members		_____	_____
Workers Compensation		_____	_____
Retirement or disability benefits:		_____	_____
Welfare benefits, ADC/AFDC (not snap/food stamps):		_____	_____
Child support received for all children		_____	_____
Any other untaxed income and benefits (untaxed portions of pensions and IRA distributions, Housing, food and other expenses paid, unsecured loans, etc. Specify source: _____)		_____	_____
Estimate Total 2026 Untaxed Income:		_____	_____
 Current Assets:			
Cash, Savings, Checking		_____	_____
Net worth of current investments		_____	_____
Net worth of businesses and investment farms		_____	_____

CERTIFICATION:

We affirm that the information reported on this worksheet is complete and correct. I understand that the Office of Financial Aid reserves the right to request additional information as needed.

WARNING: If you purposefully give false or misleading information, you may be fined, sentenced to jail, or both.

Student Signature _____ Date _____

Parent Signature _____ Date _____