2017-2018 CHANGE OF INCOME FORM

This form should be completed if you and/or your spouse or parents anticipate your 2017 income to be less than the 2015 income reported on the 2017-2018 FAFSA. Additional documentation will be reviewed to re-determine financial aid eligibility. This form is not to be used as a request for additional funding.

Complete and return this form to the Office of Financial Aid & Student Employment with supporting documentation pertaining to the individual(s) with the change of income.

Documents include, but are not limited to: Federal 2015 Tax Return, W-2 forms, most recent or last paystub, unemployment benefits, untaxed income - social security, child support received, public assistance.

Note: Upon receipt of all required documentation, please allow 14 business days for processing.

Instructions: Complete the questions below and income information chart for the 2017 calendar year using your best estimates if actual figures are not available. Enter a “0” and “NA” in any category that is not applicable.

Student Name: _____________________

Banner ID #: _____________________

Check one:

☐ I am completing this form for anticipated changes in student income for the 2017 year.

☐ I am completing this form for anticipated changes in parent/spouse income for the 2017 year.

Parent/Spouse Name: _____________________

1. Reason for change in income:

☐ Retirement ☐ New employment ☐ Loss/Termination of employment

☐ Other: _________________________________

2. Change of income effective date (must be for at least 3 consecutive months):

_______________________________
<table>
<thead>
<tr>
<th>2017 Income Source</th>
<th>Student</th>
<th>Parent 1 or Spouse (if applicable)</th>
<th>Parent 2</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Year to date earned income</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Anticipated earnings for remainder of year</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Severance pay or accumulated leave during 2017</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Unemployment compensation during 2017</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Income from retirement, annuity pension, or social security during 2017</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td>Untaxed income/benefits during 2017</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
<tr>
<td><strong>Total 2017 Income</strong> (add all sources above)</td>
<td>$</td>
<td>$</td>
<td>$</td>
<td>$</td>
</tr>
</tbody>
</table>

I (we) certify that the information provided here is complete and accurate to the best of my (our) knowledge. I (we) agree to provide further validation of these estimates, if requested.

** Please remember to attach all supporting documentation as applicable *(see list on page 1)*. **

**Student Signature:** _______________________________  **Date:** _____________

**Parent/Spouse Signature:** _______________________________  **Date:** _____________

**Warning:** If you purposely give false information on this form, you may be fined, sentenced to jail, or both.