EXPECTED 2015 TAXABLE INCOME AND UNTAXED INCOME AND BENEFITS

1) 2015 ESTIMATED Income Earned from Work (January 1 through December 31, 2015)
   Father: $_________________
   Student/Spouse: $_________________
   Mother: $_________________

2) Other taxable income (other than earned wages) expected from 1/1/15 to 12/31/15—explain and provide expected amount(s).
   (Include interest income, dividends, business income, alimony, pension, capital gains, etc.)
   Father: $_________________
   Student/Spouse: $_________________

3) Other untaxed income and benefits to be received in the year 2015—explain and provide expected amount(s).
   (Include worker’s compensation, payments to tax-deferred pension/savings plans paid directly/withheld from earnings, untaxed portions of pension plans—excluding rollovers, deductible IRA/Keogh payments, etc.)
   Father: $_________________
   Student/Spouse: $_________________

4) Other income sources for 2015:
   A) Disability Income
      Father: $_________________
      Student/Spouse: $_________________
   B) Social Security Benefits
      Father: $_________________
      Student/Spouse: $_________________
   C) Child Support Received
      Father: $_________________
      Student/Spouse: $_________________
   D) TANF/Welfare Benefits
      Father: $_________________
      Student/Spouse: $_________________
   E) Unemployment benefits
      Father: $_________________
      Student/Spouse: $_________________
   F) Other
      Father: $_________________
      Student/Spouse: $_________________

Please provide copies of written documentation that supports the information that you have provided.

I/We certify that information listed above is a complete and accurate breakdown of all expected income, taxed and untaxed, for the year 2015. I further certify that if any of the information above changes, I will notify the Financial Aid office in writing of the changes.

____________________________________  ______________________________________  ____________________
Student’s Signature  Spouse’s Signature  Date

____________________________________  ______________________________________  ____________________
Mother’s Signature  Father’s Signature  Date
### CHECK ALL REQUIRED DOCUMENTATION

- [ ] 1. 2014 Tax Transcript(s)
- [ ] 2. 2014 W-2's
- [ ] 3. Last paycheck stub(s) from last employer
- [ ] 4. Last paycheck stub(s) from all current employment
- [ ] 5. Employment Termination Letter with termination date (Letters from employers should be on company letterhead with full address of employer.)
- [ ] 6. Statement listing severance payments
- [ ] 7. Employment Letter stating annual salary and position with the company plus bonuses, commissions, etc. (Letters from employers should be on company letterhead with full address of employer.)
- [ ] 8. Documentation of Unemployment Benefits
- [ ] 9. Documentation of untaxed income or benefit
- [ ] 10. Rent receipts/documentation of separate households
- [ ] 11. Court Document
- [ ] 12. Signed letter from an attorney
- [ ] 13. Divorce Decree
- [ ] 14. Death Certificate/Obituary
- [ ] 15. Notarized Statement of Circumstances
- [ ] 16. Other ______________________________________________________________________________________

### Financial Information

<table>
<thead>
<tr>
<th>Status</th>
<th>2015 AGI</th>
<th>Original EFC</th>
</tr>
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<tbody>
<tr>
<td>Approved</td>
<td>New 2015 AGI</td>
<td>Original EFC</td>
</tr>
<tr>
<td></td>
<td>New 2015 Untaxed</td>
<td></td>
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FAA ______________________________ Date ________________________

Date Rec’d. __________ By __________