

Your **2017-18** financial aid award is based on **2015** income information reported on the financial aid applications. If you have experienced a reduction in the amount of income you received or loss of employment in **2016** you may request that the Financial Aid Committee review your circumstances.

We understand that changes in your family's income and/or employment can be very stressful and we will work closely with your family to address your unique circumstances. Regulations governing the financial aid programs, however, require that we obtain documentation before making any financial aid adjustments. If you have recently lost employment, we understand that it may take some time to gather the required documentation.

Please provide the following (if applicable):

- 2016 federal tax returns with W-2 statements if not already on file with our office
- The last paychecks showing year-to-date earnings (for both parents), if 2016 federal taxes are not complete.
- Termination letter or letter verifying reduction in salary
- Documentation of severance package and accrued vacation/sick days
- Documentation of unemployment benefits received
- Monthly Expense Statement (available for downloading at <http://undergradaid.northwestern.edu>)

Name of individual experiencing the reduced income/unemployment: _____

Date when reduced income/unemployment began (if applicable): _____

2016 GROSS WAGES

Parent #1 Name: _____ Parent #2 Name: _____

Wages earned by Parent #1 from 1/1/2016 to 12/31/2016: \$ _____

Wages earned by Parent #2 from 1/1/2016 to 12/31/2016: \$ _____

OTHER INCOME IN CALENDAR YEAR 2016

Severance: \$ _____ Child Support \$ _____

Unemployment Benefits \$ _____ Social Security Benefits \$ _____

Worker's Compensation \$ _____ Payments to Tax Deferred Plans \$ _____

Interest/Dividend Income \$ _____

Other: _____ \$ _____ Other: _____ \$ _____

I certify the information listed above is a complete and accurate breakdown of all expected income, taxed and untaxed, for the calendar year 2016. I further certify that if any of the above information changes, I will notify the Office of Financial Aid in writing of the changes.

Parent's Signature: _____ Date: _____