

If you have experienced a substantial reduction in income in 2017 you may request a review of your eligibility.

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.

Student Name: \_\_\_\_\_ NU ID: \_\_\_\_\_

Please provide the following (if applicable):

- 2017 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 2017 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 (download at <http://undergradaid.northwestern.edu/forms>)

Name of individual experiencing the reduced income/unemployment: \_\_\_\_\_

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

### 2017 GROSS WAGES

Parent #1 Name: \_\_\_\_\_ Parent #2 Name: \_\_\_\_\_

Wages earned by Parent #1 from 1/1/2017 to 12/31/2017: \$ \_\_\_\_\_

Wages earned by Parent #2 from 1/1/2017 to 12/31/2017: \$ \_\_\_\_\_

### OTHER INCOME IN CALENDAR YEAR 2017

Severance: \$ \_\_\_\_\_ Child Support \$ \_\_\_\_\_

Unemployment Benefits \$ \_\_\_\_\_ Social Security Benefits \$ \_\_\_\_\_

Worker's Compensation \$ \_\_\_\_\_ Payments to

Interest/Dividend Income \$ \_\_\_\_\_ Tax Deferred Plans \$ \_\_\_\_\_

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 2017. 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: \_\_\_\_\_