ESTIMATED YEARLY INCOME - INDEPENDENT STUDENTS

SPECIAL CIRCUMSTANCES - LOSS OF INCOME

STUDENT:_	STUDENT:Last name				FIDN#: A							
		Last name			First name							
Today's Date:												
Your 2014-201 information sub					ied on your 2	014-2015 FAF	SA. The I	FAFSA data ref	lects			
You indicated the ability to copages of the fo	ontribute to llowing Spe	your educ	ation. If the nstances Est	loss of incom imated Yearly	e has continue	ed for at least	12 weeks,		e all			
Fordham Unive Please be awar Appeals must b	e that New	York State	TAP grant eli	gibility will con								
2. FOR 2 3. Attach staten of can 4. This f institu	ZERO AMOU a supporting nents, letters celled check orm will be u	JNTS, ENT documental from emplo s, etc. See used to dete	ER "O". DO Nation for each it byers, letters to page 4 for a li ermine your e	TOT LEAVE BL tem listed in S from insurance st of acceptabl ligibility for add	ANK. ections II and I benefits, copie e documentatio litional federal a	s of unemployr n. aid. If you wish	ost recent p nent benefit n to be cons	of this form) paystubs, W2's, its statements, co- sidered for addit ed and is base	opies ional			
Section I – List the family m Name 1. Section II – Me				come and their	•	the student. Relations	ship					
	Age If 24 or older,	Code* Select from below	2014-15 School Year		Year	ear 2013-14 School Yea						
Last/First Name aclude anyone living in sehold , if you provide at ast one-half of support			Matri at least	culated one term ck one Part-time	Name of School/ College	Name of School/Coll ege	Year in School	Total Financial Aid	Parent's Contributio			
						tudent's brother 's step-brother/			se			
	= Student's o	child/stepch	ild 6 = Stude	nt's grandpare	nt 7 = Student	's step-brother/	sister 8 =	Other**				
5	Student's o	child/stepch	ild 6 = Stude	nt's grandpare	nt 7 = Student	's step-brother/	sister 8 =	Other** Provided \$				

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Section III – Taxable and Untaxed Income (FOR ZERO AMOUNTS, ENTER "0". DO NOT LEAVE BLANK)

1)	TAXABLE INCOME	January 1, 2014 through today	+	Today through Dec 31, 2014	=	Total Estimated for the 2014 Year	Office Use Only
A)	Gross Earnings from work for <u>Student</u> (i.e. last pay stub)	\$	+	\$	=	\$	\$
B)	Gross Earnings from work for Spouse (i.e. last pay stub)	\$	+	\$	=	\$	\$
C)	Severance Package (i.e. benefit statements or stubs)	\$	+	\$	=	\$	\$
D)	Interest Income (i.e. bank statements)	\$	+	\$	=	\$	\$
E)	Dividend Income (i.e. bank statements)	\$	+	\$	=	\$	\$
F)	Alimony received (i.e. copies of cancelled checks)	\$	+	\$	Ш	\$	\$
G)	Business or Farm Income	\$	+	\$	Ш	\$	\$
H)	Taxable IRA Distribution, Pensions and Annuities (i.e. bank statement)	\$	+	\$	=	\$	\$
l)	Rental Real Estate, Royalties, Partnerships, S Corps., etc.	\$	+	\$	=	\$	\$
J)	Unemployment Compensation (i.e. benefit statements or stubs)	\$	+	\$	=	\$	\$
K)	Social Security Benefits (i.e. benefit statements or stubs)	\$	+	\$	=	\$	\$
L)	Insurance Benefits (i.e. benefit statements or stubs)	\$	+	\$	=	\$	\$
M)	Other (list source)	\$	+	\$	=	\$	\$
Total Taxa	able Income for 2013 (Add A through N)	\$	+	\$	=	\$	\$
2) UNTA	XED INCOME	January 1, 2014 through today	+	Today through Dec 31, 2014	=	Total for the 2014 Year	Office Use Only
O)	Tax Exempt Interest (i.e. bank statements)	\$	+	\$	=	\$	\$
P)	Untaxed Portions of pensions, excluding rollovers (i.e. bank statements)	\$	+	\$	Ш	\$	\$
Q)	Social Security benefits untaxed –list amounts for all family members (i.e. benefit statements or stubs)	\$	+	\$	=	\$	\$
R)	Workers Compensation (i.e. benefit statements or stubs)	\$	+	\$	Ш	\$	\$
S)	Child Support received for all children (i.e. copies of cancelled checks)	\$	+	\$	=	\$	\$
T)	IRA deductions/payments to SEP/Keogh or other qualified plans	\$	+	\$	=	\$	\$
U)	Payments to tax deferred pension and savings plans. Include untaxed portions of 401(k) and 403(b) plans (i.e. pay stub)	\$	+	\$	=	\$	\$
V)	Living and Housing allowances (for clergy and military, etc.)	\$	+	\$	=	\$	\$
W)	Veterans non-educational benefits (i.e. benefit statements or stubs)	\$	+	\$	=	\$	\$
X)	Welfare Benefits (i.e. benefit statements or stubs)	\$	+	\$	=	\$	\$
Y)	Other (list source)	\$	+	\$	=	\$	\$
Total Unta	xed Income for 2013 (Add O through Y)	\$	+	\$	=	\$	\$
3) TOTA	L INCOME (1) Taxable Income plus (2) Untaxed Income	\$	+	\$	=	\$	\$

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Section IV – Assets Information Required
vide the information below as of the date you signed your FAFSA

S	Students Assets				
Amounts in Cash, Savings and Checking Accounts		\$			
Do your own a home? Circle One: Yes / No	Student's monthly mortgage payment \$				
Student's Property/Home (if applicable): If student owns	s their home provide: Year purchased Purchase price \$	\$	\$		
<u>Investment – Real Estate</u> Real Estate – Provide address below (do not include the	e home you live in)				
Address 1:		\$	\$		
Investments - Other a. Money Market funds, mutual funds and trust funds b. Certificates of deposit, stocks, stock option, bonds, or	ther securities, education IRA's and college savings plans				
c. DO NOT INCLUDE life insurance policies, retirement Business/Farm -	plans or pre-paid tuition plans	\$	\$		
Type of business/farm:					
■ Not applicable ■ Sole proprietor ■ Corpor	ration Partnership				
Your percentage of ownership% Number of e	employees	\$	\$		
have given on this form. I realize information is correct at this time, false or misleading information materials.	is true and complete to the best of my knowledge. I a that this proof may include a copy of my U.S., state, and that I will send timely notice of any significant chay result in financial or criminal repercussions.	or local income tax returns.	I certify that all		
Office Use Only					
Cnslr: (print name)	Cnslr: (Signature)	Date:			
Manager:	Signature:	Date:			
PJ Performed: Yes / No New	v AGI: New Tax Paid:	New EFC:			

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List of Acceptable Documentation to Project ESTIMATED YEARLY INCOME

All circumstances require the following:

- 1. Copies of student's, and spouse's federal 2012 tax return, all related schedules and all W2's
- 2. A concise statement describing the situation and the extent of the change.
- 3. Special Circumstances Estimated Yearly Income Form
- 4. Documentation that confirms the event occurred, the date of the occurrence, and any monetary benefits to be received as a result of the occurrence. Specifically:

A) Divorce/Separation

- (1) Divorce or Legal separation court statements
- (2) If no legal separation exists, proof of separate residences such as utility bills, leases, in addition to documentation from an objective third party acting in a professional capacity, i.e. attorney, counselor, etc.

B) Death of a Wage earner

- (1) Copy of death certificate
- (2) Insurance benefits
- (3) Employer benefits and/or other benefits or payouts
- (4) Social Security

C) Change in Employment

- (1) Letter from previous employer indicating last date of employment and amount of benefits to be paid out (i.e. severance pay, vacation pay, etc.)
- (2) Copy of the final pay stub from previous employer.
- (3) Letter from the new employer indicating start date and pay rate.
- (4) Copy of the most recent pay stub from the current employer.
- (5) Letter indicating change in position, the effective date and new pay rate

D) Loss of Employment

- (1) Letter from previous employer indicating last date of employment and amount of benefits to be paid out (i.e. severance pay, vacation pay, etc.)
- (2) Copy of the final pay stub from previous employer.
- (3) Notice from Bureau of Unemployment, which indicates eligibility or ineligibility for unemployment compensation.

E) Loss of, or decrease in, benefits

- (1) Copy of a notice of benefit termination, or change in benefit
- (2) Copy of the court order that specifies when the benefit payments cease.

F) Receipt of non-recurring income

- (1) Documents from a company, bank, or agency that state the source of the income and confirm that the income is non-recurring.
- (2) Summary of how the income was utilized and how much is being reported as an asset
- (3) Tax return from the prior year as well as the base year to confirm the benefit was not also received in prior years.

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