

Estimated Year Income part 1 of 2

2016 – 2017

STUDENT / PARENT INFORMATION

Student's Name: _____ ☐ MD ☐ PA

Yale ID Number: _____ Date of Birth: _____

Student's Permanent Address: _____

Student's Email: _____ Phone: _____

Parent's Email: _____ Phone: _____

2016 INCOME UPDATE

Who is experiencing the loss of wages? ☐ Father ☐ Mother ☐ Both

Father's unemployment start date: _____ Mother's unemployment start date: _____

WAGES EXPECTED IN 2016

2016 ESTIMATED

Wages earned by Parent 1/Step Parent 1 (*January 1, 2016 to present*)

\$

Wages earned by Parent 2/Step Parent 2 (*January 1, 2016 to present*)

\$

Total Expected Wages that will be earned by Mother/Stepmother in calendar year 2016
(*January 1 through December 31*)

\$

Total Expected Wages that will be earned by Father/Stepfather in calendar year 2016
(*January 1 through December 31*)

\$

OTHER INCOME EXPECTED IN 2016

2016 ESTIMATED

Severance Pay

\$

Unused Sick Pay

\$

Unused Vacation Pay

\$

Unemployment Benefits

\$

Worker's Compensation

\$

Interest/Dividend Income

\$

Child Support

\$

Social Security Benefits

\$

Payments to Tax-Deferred plans

\$

TANF/Welfare Benefits

\$

Other (*please explain*)

\$

Total

\$



Estimated Year Income part 2 of 2
2016 – 2017

Please provide documentation listed below (if not available, please include written explanation).
We encourage you to write a letter elaborating on your circumstances and attach it to this form.

- If not already on file with our office, please provide a signed copy of the 2015 federal income tax return including all schedules and W2 forms
- Termination letter or letter verifying reduction in salary
- Documentation of severance package and accrued vacation/sick days (if applicable)
- Documentation of unemployment benefits received or to be received
- Last paycheck stub showing year-to-date earnings (for both parents)
- A Parental Monthly Expenses Statement

CERTIFICATION

I/We 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 immediately notify the Financial Aid Office in writing of the changes.

Parent 1/Step Parent 1 Signature: _____ Date: _____

Parent 2/Step Parent 2 Signature: _____ Date: _____

