

TABLE 4: UNUSUAL DEBTS (for student/spouse and parents of dependent student)

- Do you or your parents have unusual debts or loans for which you or they are **currently** making monthly payments? (Such as mortgages or credit card debts to cover unemployment expenses or failed businesses; legal fees for divorce, adoption, etc.; education loans of parents or spouse; or personal debts for nondiscretionary expenses such as nursing home expenses.) Yes No
- If yes, list type and purpose of debt, total amount owed, and amount of monthly payment on the grid below.
- Please explain if these expenses will be higher in 2017, and why. _____
- From what sources will you finance these expenses? _____

TYPE OR CAUSE OF DEBT AND WHO OWES IT	AMOUNT OF ORIGINAL DEBT AND DATE INCURRED (MONTH/YEAR)	BALANCE OWED ON DEBT	DATE PAYMENTS BEGAN	MONTHLY PAYMENT	HOLDER OF DEBT	DATE PAYMENT SENT

TABLE 5: INCOME REDUCTION (for student/spouse and parents of dependent student)

- Will your income and/or your spouse's or parents' income be less in 2016 than in 2015 for any of the following reasons? Yes No
- Please circle the appropriate reason, attach an explanation, and give the date of the change in your situation. Date: _____ a. Unemployment or change in employment b. Divorce/separation
c. Death of spouse or parent d. Disability of student, spouse, or parent
e. Income reduction due to status as an affected individual under the HEROES Act¹
f. One-time income (examples: inheritance, moving allowance, prior-year Social Security payments, or IRA/pension distribution)
g. Loss or reduction of untaxed income such as child support, etc.
- If 2f is circled, identify source of income and how funds were spent or invested. _____
- If 2a, 2b, 2c, 2d, 2e, or 2g are circled, please complete the following income information for the period _____ (month/year) to _____ (month/year)
If you or your parent are divorced or separated, give only your information or the information of the custodial parent.
If the loss of income was due to the death of your spouse or parent, give only your information or that of the surviving parent.

ANTICIPATED INCOME FROM _____ TO _____	PARENT	STUDENT AND SPOUSE
Wages, salaries, tips (including severance pay, disability payments, and any income from work)		
Other taxable income		
Untaxed Social Security benefits		
Temporary Assistance to Needy Families (TANF)		
Child support received		
Other untaxed income		
Total anticipated income		

DEPENDENCY STATUS DOCUMENTATION FORM

Federal law assumes the family has the primary responsibility for meeting the educational costs of students. Therefore, a student must meet certain federal criteria to qualify for financial aid as an independent student. If you do not meet one of the criteria listed on the FAFSA, you will be evaluated as a dependent student, meaning your parents must provide income and asset information. If there are extraordinary circumstances that may warrant re-evaluation of your dependency status, provide the following information so your financial aid administrator may make this determination. You may be asked for additional documentation depending on your individual situation.

Attach the following information to this form:

- ◆ **Letter from you explaining:** (1) Nature of your relationship with your parents; (2) Location of both parents and when you last had contact with them; (3) Why you cannot obtain information and/or support from your parents; and (4) How you have been supporting yourself.
- ◆ **Statement from a responsible adult** who is aware of your situation and can corroborate the facts you present in your letter.
- ◆ **Copies** of your two most recent federal tax returns.

Please complete the following statement of your calendar year income and expenses:

INCOME (If any amounts are zero, please explain on a separate sheet.)	CURRENT CALENDAR YEAR	NEXT CALENDAR YEAR
Earned income (e.g., wages, salaries, tips, work-study earnings)	\$	\$
Financial support received from parents	\$	\$
Monetary value of other support (e.g., health insurance, room and board) received from parents	\$	\$
Monetary value of other support (e.g., room and board) from persons other than parents (indicate source)	\$	\$
Amount of other annual income (indicate source)	\$	\$
Amount of other annual income (indicate source)	\$	\$
Amount of other annual income (indicate source)	\$	\$
TOTAL	\$	\$

DEPENDENCY STATUS DOCUMENTATION FORM (CONT'D)

EXPENSES (If any amount is zero, please explain on a separate sheet.)	CURRENT CALENDAR YEAR	NEXT CALENDAR YEAR
Housing	\$	\$
Food	\$	\$
Transportation (e.g., car payments, insurance, gas, maintenance)	\$	\$
Utilities	\$	\$
Child care and/or dependent care	\$	\$
Personal (e.g., clothing, entertainment)	\$	\$
Other (indicate source)	\$	\$
Other (indicate source)	\$	\$
Other (indicate source)	\$	\$
TOTAL	\$	\$

I certify that the information provided is true and correct.

Student's Signature: _____

Date: _____

PARENTAL REFUSAL TO COMPLETE FAFSA DOCUMENTATION FORM

Federal law assumes the family has the primary responsibility for meeting the educational costs of students. Therefore, a student must meet certain federal criteria to qualify for financial aid as an independent student. If you do not meet one of the criteria listed on the FAFSA, you will be evaluated as a dependent student, meaning your parents must provide income and asset information. If your parents refuse to provide parent information on the FAFSA and no longer provide any financial support to you, your financial aid administrator may make a determination that you may borrow a Direct Unsubsidized Loan only, if you are otherwise eligible for the loan. Please provide the following information so your financial aid administrator may make this determination. You may be asked for additional documentation depending on your individual situation.

Attach the following information to this form:

- ◆ **Statement from your parent** stating: (1) They have stopped providing financial support to you (including the date when the financial support stopped); (2) Will not provide financial support in the future; **and** (3) Their refusal to complete the parental section of a FAFSA.
- ◆ **If you are unable to obtain the parental statement, provide a letter from a responsible adult** who is aware of your situation and can describe the nature of your relationship with your parents.
- ◆ **Statement from you describing:** (1) Nature of your relationship with your parents; (2) Location of both parents and when you last had contact with them; (3) Why you cannot obtain information and/or support from your parents; and (4) How you have been supporting yourself financially.

Please complete the following statement of your calendar year income and expenses:

INCOME	CURRENT CALENDAR YEAR	NEXT CALENDAR YEAR
Earned income (e.g., wages, salaries, tips, work-study earnings)	\$	\$
Financial support received from parents	\$	\$
Monetary value of other support (e.g., health insurance, room and board) received from parents	\$	\$
Monetary value of other support (e.g., room and board) from persons other than parents (indicate source)	\$	\$
Amount of other annual income (indicate source)	\$	\$
Amount of other annual income (indicate source)	\$	\$
TOTAL	\$	\$