



**2016-2017 Academic Year
Parent Projected Year Income Declaration**

Please print.

Student's Name: _____ QU ID _____

You have asked the Office of Financial Aid to consider a change in your parents' financial circumstances when determining your eligibility for financial assistance. Your parent(s) must provide an accurate itemization of all forms of income they expect to receive or have already received between January 1, 2016, and December 31, 2016.

A. REQUIRED DOCUMENTATION *Please provide the following documentation:*

- Letter from parent(s) explaining in detail the reason for the change in their income
- Signed copy of Parent 2015 Federal Income Tax Return and W-2s
- Signed copy of Student 2015 Federal Income Tax Return and W-2s
- Letter from employer(s) indicating: date of termination, reduction in working hours, reduction in salary/wages
- Copy of most recent pay stub (including 2016 year-to-date earnings)
- Copy of last pay stub(s) from previous employment (including 2016 year-to-date earnings)
- Statement from: Social Security Administration, Public Assistance agencies, State Unemployment Compensation Office, state or private disability insurance agencies
- 2016 Federal Income Tax Return, when available
- 2016 W-2 or 1099 earnings statement(s), when available

Families applying for special conditions must complete the verification process prior to consideration for special circumstances.

B. PARENT 2016 INCOME AND EXPENSE ITEMIZATION

2016 Parent(s) Taxable Income	Parent Expected Taxable 2016 Income	
	Parent 1	Parent 2
a. Wages, salaries, and tips to date	\$ _____	\$ _____
Estimate for remainder of 2016	\$ _____	\$ _____
Total in 2016	\$ _____	\$ _____
b. Interest/dividends	\$ _____	\$ _____
c. Alimony	\$ _____	\$ _____
d. Business/Farm Income	\$ _____	\$ _____
e. Capital gains	\$ _____	\$ _____
f. Pensions, annuities, and IRA distributions	\$ _____	\$ _____
g. Rents, royalties, partnerships and trusts, capital gains	\$ _____	\$ _____
h. Social Security benefits	\$ _____	\$ _____
i. Unemployment compensation	\$ _____	\$ _____
j. Other (describe)	\$ _____	\$ _____
k. Total taxable income (add lines a through j)	\$ _____	\$ _____
2016 Parent(s) Untaxed Income		
l. Worker's Compensation/Disability Benefits	\$ _____	\$ _____
m. Child support/TANF (do not include food stamps)	\$ _____	\$ _____
n. Noneducational Veterans benefits	\$ _____	\$ _____
o. Cash support or money paid on your behalf	\$ _____	\$ _____
p. Housing, food and other living allowances for military, clergy, and others (include cash payments and cash value of benefits)	\$ _____	\$ _____
o. Cash support or money paid on your behalf	\$ _____	\$ _____
q. Payments made to tax deferred pensions such as IRA, KEOGH, 401(k), 403(b)	\$ _____	\$ _____
r. Other (describe)	\$ _____	\$ _____
s. Total untaxed income (add lines l through r)	\$ _____	\$ _____
Total of 2016 taxable and untaxed income (add lines k and s)	\$ _____	

C. CERTIFICATION

I (We) understand that Quincy University may verify all estimates of income upon year end. Adjustments may be made to current or future financial aid if inaccurate estimates of income result in a financial aid overaward. I (We) certify that all information provided here is accurate to the best of my (our) knowledge.

Parent Signature _____ Date _____