CREIGHTON UNIVERSITY Financial Aid Office 2500 California Plaza, Omaha, NE 68178

2017-18 PARENTS' ESTIMATED YEARLY INCOME

Student Signature

Student's Full Nan		Student's NET ID						
we may consider usin income decreased. Se	ng your parents' esting the back of this form	mated income to det a for an explanation	ermine your fire of Creighton	nancial aid	l eligibility, w circumstanc	ve need do	mount in 2015 (as reported on the commentation as to why and whe and required documentation.	en the family's
Parents' 2017 income explain in detail). Ale							late it became effective and use cated below.	the space below to
Loss of employment	: Separa	ation / Divorce:	Loss o	of untaxed	l benefits:	W	orking fewer hours:	_ Other reason:
Please complete each	line below and atta a social service ager	ch documentation	for entries. Th	is could be	e in the form	of pay stu	income going forward through c ibs, information from your empl deral tax return transcripts and V	oyer, copy of a cour
	Paren	t 1 👢		Par	ent 2	•		
Income Received from:	Actual To-Date SS Estimated for remaining Calendar Yr SS		Actual To	- Date	Estimated for remaining Calendar Yr \$\$		Year total (Actual- to- date plus estimated) \$\$	
Earnings from Work					44			
Interest/ Div Income								_
Business Income								
Farm Income								
Unemployment Benefits								
Soc Sec Benefits (taxable)								
Housing allowance military/clergy								
Alimony received								
Pensions / IRA								_
Capital Gains								
Rental / Royalty								
Other Untaxed Inc. i.e.: Child Support								
Other (please explain)								
схрішіі)				ļ	Grand	d Total:	<u> </u>]
	providing this info	rmation will delay	and/or suspen	d a final	ation, as req	uested, to	o verify the information shown cial Aid Office. All decisions r	
With my signature l knowledge.	pelow, I certify that	the information p	rovided on thi	s form an	d any suppo	rting fori	ns is true and correct to the be	est of my
Parent Si	gnature			Date signed				

Date signed

over

Special Circumstances Requests/Reviews Policy

Creighton University, as allowed by law, considers life changes that occur after the completion of the FAFSA. Special circumstances are reviewed on a case-by-case basis, and the university is limited regarding the adjustments that can be made. The Financial Aid Office must have the results of a valid FAFSA prior to any review. If requested documentation is not attached or items are missing, the form may not be processed. As such, if clarification of your situation is necessary, we may request additional information or documentation beyond the requested items below.

- * If you estimate that your 2017 income will be less than your 2015 income reported on the FAFSA due to
 - loss of employment
 - separation/divorce or death of a parent
 - reduction in work hours/pay, (not including overtime or bonuses)
 - loss of income/benefits, etc.
 - inflated income due to withdrawal of funds to pay for education

then please provide the following:

- A <u>separate page</u> explaining the reduction/difference in income.
- A completed <u>Estimated Yearly Income Form</u> (to print the form go to <u>www.creighton.edu/financialaid</u>, click on Commonly Used Forms).
- Applicable <u>third-party documentation</u> supporting the claim (such as copy of final paystub, copy of letter from employer, copy of benefits package, unemployment information, separation agreement, etc.).
- A copy of your 2015 and 2016 federal tax return transcripts.
- Copies of all 2015 and 2016 W-2s
- Copy of the Creighton Verification Worksheet (go to <u>www.creighton.edu/financialaid</u>, click on Commonly Used Forms).
- * If you have younger children who are attending private elementary, middle/jr high, or high school and you are paying tuition for them, you may indicate the amount you are paying <u>out-of-pocket</u> on the Creighton Verification Worksheet. Please do not include tuition you are paying for children attending college as that information is reflected on the FAFSA in the household size and number in college section.
- * If you would like to report high out-of-pocket medical expenses (not including premiums or deductibles), please provide a letter of explanation as well as a copy of the 2015 and 2016 federal taxes, including the Schedule A Itemized Deductions. If you do not itemize your deductions, please provide the information regarding your out-of-pocket medical expenses in a spreadsheet or other detailed format along with any documentation you feel is applicable.

Please note that it is our policy not to consider:

- a reduction in overtime pay, commission, bonuses, or one-time winnings.
- income from those who are self-employed (due to lack of official income documents that are able to be provided such as paystubs).
- Insurance Premiums or deductibles