



By completing this form you are indicating that there has been a substantial change in your family's financial situation, and you would like the Office of Financial Aid to take this updated information into consideration when reviewing your eligibility for financial aid.

Section A: Student Information

_____ Student's Last Name	_____ Student's First Name	_____ Student's M.I.	_____ Student's Social Security Number
_____ Student's Street Address (include apt. no.)			_____ Student's Date of Birth
_____ City	_____ State	_____ Zip Code	_____ Student's Email Address
_____ Student's Home Phone Number (include area code)			_____ Student's Cell/Alternate Phone Number

Section B: Indicate Your Circumstances

- Provide a written statement detailing your circumstances.
- Check the box below that best describes your circumstances and provide any required documents.
 - In all instances listed below, "parent(s)" shall refer to any parent listed on the FAFSA.
 - If you (the student) are married, you must provide all documentation pertinent to your spouse where "parent" or "parent(s)" is listed.

- Lay Off - Provide ALL of the following:
 - Letter from employer indicating effective date and any severance benefits
 - Statement from Unemployment Office outlining benefits
 - Final pay stub from laid off position
 - Most recent pay stubs of all other current positions for parent(s)

- Wage Reduction - Provide ALL of the following:
 - Letter from employer indicating effective date with prior and current hours per week
 - Most recent pay stub for parent(s)

- Parent Retirement - Provide ALL of the following:
 - Letter from employer documenting retirement date and benefits received
 - Final pay stub for retired parent
 - Most recent pay stub for parent still working, if applicable

- Parental Separation - Provide ALL of the following:
 - Legal documentation indicating effective date of separation
 - Documentation of current addresses for BOTH parents
 - Most recent W2's and/or 1099's for BOTH parents

- Parental Divorce - Provide ALL of the following:
 - Copy of divorce decree
 - Documentation of current addresses for BOTH parents
 - Most recent W2's and/or 1099's for BOTH parents
- Parent recently deceased - Provide ALL of the following:
 - Death certificate or obituary from newspaper
 - Statement of all benefits received as a result of death
- Medical Expenses incurred in 2016 NOT covered by insurance - Provide ALL of the following:
 - Provide receipts showing charges paid in 2016
 - Copy of Schedule A from your 2016 federal tax return
- Other (car payment, credit card, or previous educational loan debt cannot be considered):
 - Provide any relevant/supporting documentation

Section C: Student/Parent Projected 2017 Income

Complete the following section; do not leave any items blank; enter "0" where appropriate. Include the total amounts that you and your parent(s) have received/earned and expect to receive/earn in 2017. *If you (the student) are married, you must provide figures pertinent to your spouse where "Parent(s)" is listed.*

	<u>Student:</u>	<u>Parent(s):</u>
Taxable Wages	\$ _____	\$ _____
Unemployment Compensation	\$ _____	\$ _____
Severance Pay	\$ _____	\$ _____
IRA/Pension Distributions	\$ _____	\$ _____
Disability Income	\$ _____	\$ _____
Interest and dividend income	\$ _____	\$ _____
Rental/business/capital losses/gains	\$ _____	\$ _____
Food/Housing subsidies	\$ _____	\$ _____
Worker's Compensation	\$ _____	\$ _____
Other Income (list source): _____	\$ _____	\$ _____
Other Income (list source): _____	\$ _____	\$ _____
Other Income (list source): _____	\$ _____	\$ _____

Section D: Federal Tax Verification

In order to consider your request, you must submit documents for federal tax verification.

- I will complete the appropriate 2017-2018 verification worksheet and provide all related information/documents as described on the worksheet:
 - Dependent Students: <http://colby-sawyer.edu/assets/pdf/dependent-verification.pdf>
 - Independent Students: <http://colby-sawyer.edu/assets/pdf/independent-verification.pdf>

-OR-

- I have already completed tax verification for the 2017-2018 academic year.

Section E: Certification and Signatures

By signing this worksheet, I (we) certify that all of the information provided on this form is accurate and complete to the best of our knowledge. We have provided all required documents relating to our situation as listed above. We understand that completing this form does not guarantee financial aid will be increased. We also understand that if our financial aid award is revised based on using our projected income, we will be required to provide documentation of that income. If that documentation changes the projected income used, we understand the financial aid award will be adjusted. Additionally, we understand that our projected year income will be used each year when determining eligibility for financial aid. We agree to notify the Financial Aid Office if our income changes.

I (we) also understand that Special Consideration funds are granted based on the assumption that the student needs all original funds awarded to them, including Federal Direct Student Loans. Should the student choose to decline these loans after Special Consideration funds are granted, the granted funds will be subsequently cancelled.

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.

Student Signature (Required)

Date

Parent Signature (Required if student is dependent based on FAFSA)

Date

Spouse Signature (Required if student is married)

Date

**** The review of your circumstance may be delayed if ALL documentation has not been provided ****

Please mail, fax, or scan and email this worksheet and any related documents to the Financial Aid Office.

Colby-Sawyer College • 541 Main St • New London, NH 03257
email: cscfinaid@colby-sawyer.edu • phone: 603-526-3717 • fax: 603-526-3737

You should make a copy of this worksheet for your records.