Request for Revision 2014-2015

PARENT SECTION I

Reason for Request: We want to be helpful, but we do not want to be unrealistic to the University’s ability to revise the financial aid package. Revisions will be considered only if one of the criteria listed below is met. We make every effort to respond as quickly as possible; however, the response time may be 3-4 weeks in April and up to 6 weeks at other times of the year. Below please indicate which of the following circumstances best describe your situation:

- New expenses relating to educational costs for family members currently enrolled in a degree program, not previously considered: complete Parent Section II with the following information: the name of family member, name of institution, cost of attendance, degree program, any reimbursement of costs, financial aid to be received and expected date of degree completion.
- Extraordinary additional medical or dental expenses, usually in excess of 4% of total parent income, that have occurred since filing the 2014-2015 College Scholarship Service (CSS) PROFILE, that are not covered by insurance: itemize in Parent Section II and submit documentation.
- A parent has become unemployed or has a reduction in earnings for the period January through December 2014: complete Parent Section II and Parent Section III and, if appropriate, provide the date of termination and expectation for future employment.
- Other extenuation circumstances that may justify a revision: explain in Parent Section II and attach supporting documentation. In addition, when appropriate, complete Parent Section III.

PARENT SECTION II

Explanation of Circumstances: (It may be necessary to explain further on a separate sheet of paper. Be sure to attach supporting documentation.)

Parent Signature Date
PARENT SECTION III

Projected 2014 Income: Complete the following information using the best projection possible for January through December 2014. We recommend that you retain a copy of the breakdown for your records, and near the end of 2014, report increases of $3,500 or more in the projected income.

Father’s wages, salaries, tips: $______________
Mother’s wages, salaries, tips: $______________
Interest income: $__________________
Dividends: $__________________
Net income from business or farm: $__________________
Net rental income (or loss): $__________________
Pensions, annuities, royalties, partnerships, estates, trusts, etc.: $__________________
Unemployment compensation $__________________
Other taxable income: (identify) $__________________
Child Support $__________________
Your Contributions to tax-deferred retirement plans (401k, 403b, 457, 414h, etc.) $__________________
Untaxed Disability Income: $__________________
Social Security: $__________________
Housing and living allowance paid to clergy, military, etc.: $__________________
Other untaxed income: (identify) $__________________

TOTAL from all sources: $__________________

Parent’s Signature ___________________________ Date __________

Student’s Signature ___________________________ Date __________

For fastest processing, please fax this form to the Financial Aid Office