



BOISE STATE UNIVERSITY

STUDENT AFFAIRS
Financial Aid and Scholarships

Financial Aid and Scholarships
Administration Building Room 113
1910 University Drive
Boise, ID 83725-1315

Phone: (208) 426-1664
Fax: (208) 426-1305
Email: FinancialAid@boisestate.edu

2016-2017

SPECIAL CONDITIONS – 2016 Actual Income Review

STUDENT NAME: _____ ID: _____ PHONE: _____

Deadline for submitting this form: April 1, 2017

Deadline for **summer only students** – whichever date is earlier: 3 weeks before the end of your last session, or July 15, 2017

According to the federal financial aid application (FAFSA), a family’s 2015 income determines federal aid eligibility for the 2016-2017 academic year. If unexpected circumstances have reduced your household earnings since 2015, and your family’s 2016 income is a more accurate reflection of your ability to pay for education, then you can request a financial aid counselor to review your situation on a case-by-case basis by submitting this form with all required documents attached.

Approval depends on your specific circumstances. Please provide detailed information in your letter of explanation and attach documentation of your circumstances with this completed form. You may be asked to submit additional documents or explanations. Please check your BroncoMail for any follow-up questions.

1. Which individual(s) experienced a reduction in income? Check all that apply.

- Student Spouse Parents

2. What caused the unexpected financial reversal?

- Layoff/Termination/Business Closure.** Effective Date: _____. Attach a document from employer showing effective date and severance paid. Attach documentation of unemployment received.
- Decline in self-employment income.** Attach signed federal tax schedules C and/or E from 2016 federal tax return. The tax filer’s signature on the Schedule C or E is required.
- Quit or reduced employment to attend school.** Effective Date: _____. Attach document from employer stating effective date.
- Other.** Please specify: _____ Attach documentation.

3. Attach the following:

- Detailed letter** explaining the unique circumstances that caused a change in your family’s income from 2015 to 2016 and how this change has impacted your ability to pay for educational costs.
- Documentation of student’s income from 2016**, including student’s W-2s and student’s IRS tax return transcript. If student did not work (or file taxes) in 2016, please include this information in your letter.
- IRS transcripts of 2016 tax returns** for all individuals on your FAFSA who file 2016 taxes.
Request your IRS tax **return** transcript online at www.irs.gov/transcript or at your local IRS office. This transcript is a special view of your tax return and is on IRS letterhead. It can be requested from the IRS approximately 2-4 weeks after you file taxes electronically. If you mailed your return, it takes about 6 weeks to become available. (Note: A transcript is different from your tax return, and we need the **return** transcript.)
- W-2’s and 1099’s** from 2016 for all individuals on your FAFSA. Provide copies we can keep.

4. Complete the Income and Assets chart using annual gross income for 2016.

Independent students must complete each item for student (and spouse, if married).

Dependent students must complete each item for student and parent(s).

2016 Income and Assets		
Write \$ amount in every box. Write "0" instead of n/a.	Student (and spouse)	Parent(s)
Other taxable income (refunds from state tax returns, interest income, dividend, income, etc.) Include earned income credit.	\$	\$
Unemployment benefits and/or workman's compensation	\$	\$
Other untaxed income such as AFDC (Aid to Families with Dependent Children), ADC, other Welfare Benefits, Refugee Assistance, Work Source non-education benefits, disability income). Specify what it is.	\$	\$
+ Child support received	\$	\$
- Child support paid	\$	\$
Other cash support or any money paid on your behalf, including support from a non-custodial parent or any other person	\$	\$
Veterans' non-educational benefits (death pension, dependency & indemnity compensation, disability, etc.)	\$	\$
Housing, food, and other living allowances paid to members of the military, clergy, missionaries and others (including cash payments and cash value of benefits).	\$	\$
Assets: As of today, what is the net worth of investments, including real estate (excluding your home and retirement plans)?	\$	\$
Assets: As of today, what is the net worth of current businesses and/or investment farms? Do not include a farm that you live on and operate	\$	\$
Assets: As of today, what is your (and spouse's) total balance of cash, savings, and checking accounts? Do not include student financial aid.	\$	\$
Exemptions: What amount of your gross earnings is from work/study income?	\$	N/A

5. Print this page to sign. Student signature is required.

Independent students: If you are married, your spouse must sign. Dependent students: One parent must sign.

CERTIFICATION: I certify the information provided is true. I understand if I use false information to establish eligibility for federal student financial aid, I could be subject to a fine, jail, or both.

Student _____ Date _____ Parent 1 _____ Date _____

Spouse _____ Date _____ Parent 2 _____ Date _____