

St. Gregory's University
Office of Financial Aid Services
5801 E 41st Street
Tulsa, OK 74135
(918) 610-8888

2011-2012 DEPENDENT STUDENT SPECIAL CONDITION / PROJECTED INCOME FORM

Student Name: _____ Daytime phone #: _____

Social Security #: _____ SGU ID #: _____

1. **As of today**, has your parent or stepparent lost his or her job for at least 10 weeks in 2011? Yes____ No____

If "Yes", which parent lost his or her job? _____

What date did the parent lose his/her job? _____

2. **As of today**, has your parent or stepparent been unable to work and earn money in the usual way due to a disability or natural disaster for at least 10 weeks in 2011? (Natural disaster includes such things as a tornado, fire, flood, etc.) Yes____ No____

If "Yes", which parent became unable to work or earn income and what is the nature of the natural disaster or disability? _____

What date did the change in earnings begin? _____

3. **As of today**, did your parent or stepparent receive unemployment compensation or some untaxed income or benefits (such as court ordered child support or income or benefits from a public or private agency) in 2010? If so, have they lost that benefit for at least 10 weeks in 2011? Yes____ No____

If "Yes", which parent lost the benefit and what is the source of the untaxed income or benefit? _____

What is the date the untaxed income or benefit ceased? _____

4. Were your parents married when you completed the FAFSA, but have since legally separated or divorced? If "Yes", you MUST attach documentation of legal separation or divorce. Yes____ No____

5. Has one of your parents died since you completed the FAFSA? Yes____ No____

If "Yes", report the amount of life insurance benefits you received or will receive during 2011. \$ _____

If your parent(s) answered "Yes" to any of the above questions, complete page 2 and attach documentation as instructed. If your parent(s) answered "No" to the above questions, but their total 2011 income is expected to be less than half of their 2010 income, have your parent(s) attach a letter explaining why and then go to page 2 and attach documentation as instructed.

6. Have your parents incurred other non-discretionary expenses (expenses not associated with lifestyle or personal choice)? *Examples:* Private school tuition for a child with special educational or medical needs, excessive medical expenses not covered by insurance or reimbursed by another source, care for an elderly dependent parent, etc. Yes____ No____

If you answered "Yes", you may wish to make an appointment with a Financial Aid Specialist.

GO TO NEXT PAGE

Complete the section below as indicated.

Your parent(s) must provide documentation to verify any amount earned since January 1, 2011. Attach a W-2 form or statement from the (former) employer on letterhead, or a copy of the most recent pay stub showing year-to-date earnings. For expected income, provide the best estimate based on the date the form is being completed.

WITHOUT DOCUMENTATION THIS REQUEST WILL BE DENIED.

	Amount Received Since 01/01/2011	Amount Expected Now until 12/31/2011
Father/Stepfather's wages, salaries, tips (Any income from work)		
Mother/Stepmother's wages, salaries, tips (Any income from work)		

Complete the section below and report parental income received from each source indicated.

Do not leave items blank. Enter zeros in each category for which your parents received or will receive no income.

	Amount Received Since 01/01/2011	Amount Expected Now until 12/31/2011
Severance Pay		
Pensions/Annuities		
Interest/Dividend Income		
Business/Farm Income		
Capital Gains		
Rental Income		
Alimony		
Unemployment Compensation		
Other Taxable Income		
Untaxed Pension/Annuities		
Untaxed Social Security		
Aid to Families with Dependent Children (AFDC)		
Housing Allowance (example: Military or Clergy)		
Child Support		
All Other Non-Taxable Income		

Signatures

I certify that all information is true and accurate to the best of my knowledge and that I have provided the documentation requested to verify the information provided on this form. I understand I may be required to provide additional documentation to support this request. **THE PENALTY FOR SUBMISSION OF FRAUDULENT INFORMATION ON THIS FORM MAY INCLUDE REPAYMENT OF MONEY RECEIVED, PLUS A FINE AND/OR IMPRISONMENT.**

Student Signature/Date

Father (Stepfather) Signature/Date

Mother (Stepmother) Signature/Date