



**SPECIAL CONSIDERATION  
ESTIMATE OF GROSS INCOME WORKSHEET  
Independent Student  
For Academic Year 2017-2018**

You have indicated a change in your current financial status that may impact your family contribution. In order to accurately assess your situation, please complete the following information. **DO NOT LEAVE ANY LINES BLANK. IF YOUR ANSWER IS ZERO, WRITE "0".**

**Family Wages From Work in 2017**

Student's wages to date:	\$ _____	Spouse's wages to date:	\$ _____
Student's projected wages now to year end:	\$ _____	Spouse's projected wages now to year end:	\$ _____

**Other Family Projected Income for 2017**

(Report family estimated yearly totals)

Worker's Comp:	\$ _____	Disability Pay (non-taxable):	\$ _____
Severance Pay:	\$ _____	IRA Deductions:	\$ _____
Alimony:	\$ _____	Child Support Received:	\$ _____
Rental Income:	\$ _____	Money paid on your behalf:	\$ _____
Business Income:	\$ _____	Payment to tax deferred savings/pension plan:	\$ _____
Unemployment:	\$ _____		
Other Taxable Income:	\$ _____	Other Non-Taxable Income:	\$ _____
Disability Pay (taxable):	\$ _____		

**Projected Child Support Paid in 2017**

If you will pay child support in 2017, what is the total amount? \$ \_\_\_\_\_

Student's Name: \_\_\_\_\_ Student's ID#/SSN: \_\_\_\_\_

Student's Signature: \_\_\_\_\_ Date: \_\_\_\_\_