

# University of Idaho

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Comp. By:	_____	

## 2014-2015 Appeal for Recalculation of Student Contribution

Student: \_\_\_\_\_  
Please Print

Student ID or SSN: \_\_\_\_\_

Today's Date: \_\_\_\_\_

Phone #: \_\_\_\_\_

You (and your spouse if you are married) have indicated that you have extenuating circumstances that could affect your ability to contribute to your education. This form asks for information needed to consider an appeal of your expected student contribution. It should be submitted as part of a written appeal or the **Student Appeal Letter** (Form #19 on our website).

**If you have not updated your 2014-15 FAFSA with filed tax information we will not be able to apply these changes until you do so. Log onto [www.fafsa.gov](http://www.fafsa.gov) and use the IRS Data matching tool to expedite updating this information.**

In order for us to recalculate your eligibility (if your appeal is granted), you must provide estimated 2014-15 income figures. **DO NOT** include any funds expected from financial aid, veteran's educational or untaxed social security benefits!

**All questions must be answered; blank is not an answer. Use gross income, not take-home or net.**

<u>Student's Estimated Income for 2014-2015</u>	<u>Summer 2014</u> <small>(June/July/August)</small>	<u>Academic Year 2014-2015</u> <small>(September '14 - May '15)</small>
Wages, Salaries, Tips - Student	\$ _____	\$ _____
Wages, Salaries, Tips- Spouse (if you are married)	\$ _____	\$ _____
Unemployment compensation	\$ _____	\$ _____
<b><u>Other Taxable Income</u></b>		
Interest or Dividend income	\$ _____	\$ _____
Business or Farm income (or loss)	\$ _____	\$ _____
Capital gain (or loss)	\$ _____	\$ _____
IRA or Pension Distributions	\$ _____	\$ _____
Rental income, partnership income or royalties	\$ _____	\$ _____
Other: _____	\$ _____	\$ _____
<b><u>Untaxed Income and Benefits</u></b>		
Payments to tax-deferred pension and savings plans	\$ _____	\$ _____
IRA deductions and payments to self-employed		
SEP, SIMPLE, Keogh and other qualified	\$ _____	\$ _____
Child support received for all children	\$ _____	\$ _____
Tax exempt interest income	\$ _____	\$ _____
Untaxed portions of IRA distributions	\$ _____	\$ _____
Untaxed portions of pensions	\$ _____	\$ _____
Allowances paid to members of military or clergy	\$ _____	\$ _____
Veteran's non-education benefits	\$ _____	\$ _____
Other untaxed income not reported	\$ _____	\$ _____
Money received, or paid on your behalf (e.g., bills)	\$ _____	\$ _____
Child support paid due to divorce	\$ _____	\$ _____

CERTIFICATION: By signing this worksheet, I (we) certify that all the information reported on it is complete and correct.

Student/Spouse Signature: \_\_\_\_\_ Date: \_\_\_\_\_