

Dependent Additional Financial & Untaxed Income Form

(Use black or blue ink to complete this form)

Student First Name _____ M.I. _____ Last Name _____ University ID Number _____

Fill out this entire form using your **2017** income and financial information. **We may request additional documents to support the amounts reported on this form.**

If a section does not apply to you or your parents, mark N/A in the box.

	Student	Parent
2017 Child Support Paid because of divorce or separation or as a result of a legal requirement. Do NOT include support for children in your household.	\$	\$
2017 Taxable Earnings from need-based employment programs, such as Federal Work-Study and need-based employment portions of fellowships and assistantships.	\$	\$
2017 Earnings from work under a cooperative education program offered by a college.	\$	\$
2017 Child Support Received for any of your children. Do NOT include foster care or adoption payments.	\$	\$
2017 Housing, food, and other living allowances paid to members of the military, clergy, and others (including cash payments and cash value of benefits). Do NOT include the value of on-base military housing or the value of a basic military allowance for housing.	\$	\$
2017 Veterans Non-education benefits , such as Disability, Death Pension, or Dependency & Indemnity Compensation (DIC) and/or VA Educational Work-Study allowances.	\$	\$
2017 Other Untaxed income , such as worker's compensation, disability benefits, untaxed portions of health savings accounts. Do NOT include foster care benefits, student aid, earned income credit, child tax credit, welfare payments, untaxed Social Security benefits.	\$	\$
2017 Money Received or paid on your behalf (e.g. bills), not reported elsewhere on this form. This includes money that you received from a parent or other person whose financial information is not reported on your FAFSA.	\$	<i>Does not apply for parent</i>

By signing this form, we certify that all of the information above is accurate. (Electronic signatures will not be accepted)

Student Signature (Required) _____ Date _____
 Parent Signature (Required) _____ Date _____

ATTENTION: If additional information is needed, a financial aid staff member will e-mail the student's ISU e-mail account. Allow 10-14 business days for processing.

For priority processing, submit ALL required documents by:

Fall: July 1, 2019	Spring: November 15, 2019	Summer: April 15, 2020
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Documents submitted after these dates are not guaranteed to be processed prior to the start of classes.