

## Independent Estimated Income Worksheet

	ice of Financial Aid 237 High Street odletown, CT 06459	Student's Nam	ne:
MIII	DLEIGWA, GI 06459	WES ID:	Class:
experienc ignificant	e significantly lower inco t employment change. N	me in 2016 than lot all questions	d 2016 income. It is designed for students who will in 2015 due to unemployment, illness, or other will apply to every individual. Please indicate by ons. Attach copy of last or most recent paycheck
			n your family who can usually be reached during any items on this worksheet.
Name _			Phone ()
		as the date you	te to be lower than 2015 income. Be specific and were laid off or terminated, the date your reduced u retired.
	If laid off or terminated, vinclude this amount in 7		016 income up to your termination date (also
	Amount of separation pa 2016 (list dollar amount) (also include this amoun		cation and sick leave you have or will receive in
4.	a. Weekly unemploymer	nt compensation:	·
	b. Number of eligible we	eks in 2016:	
5.	What amount, if any, do	you expect to pa	ay for child support \$
	and/or alimony \$		during 2016?
	What amount, if any, do 2016? *please provide receipts		ay in unreimbursed medical expenses during

List estimated 2016 (full year) amounts for the following:					
(Please explain losses or negative income on a separate page.)					
7.	Total wages, salaries and tips – parent 1/stepparent  Attach copy of last or most recent paycheck stub				
8.	Total wages, salaries and tips – parent 2/stepparent  Attach copy of last or most recent paycheck stub				
9.	Interest Income				
10.	Dividend income				
11.	Unemployment compensation				
12.	Net income from self-employment, farm, rents, partnerships, etc.				
	If self-employed, attach copy of current Profit and Loss	s Statement			
13.	Other taxable income such as pensions, alimony, capital gains/losses, withdrawals from retirement plans, etc.				
14.	Social Security benefits (include amounts received for dependent children, not including student)				
15.	Child support received				
16.	Other non-taxable income (such as disability, untaxed portion of pensions, VA benefits, withdrawals from retirement plans)				
	Contribution to retirement plans (such as IRA, 401(k), or 403(b) voluntary annuity contributions)				
17.	Total estimated 2016 income (sum of 7-16)				
Include with this worksheet any additional documentation of your estimated 2016 income which may					
be appropriate.					
<b>CERTIFICATION:</b> All information on this form is true and complete to the best of our knowledge.					
Studen	Date				
Spouse	Date				