SOUTHWESTERN ADVENTIST UNIVERSITY
OFFICE OF STUDENT FINANCIAL SERVICES

STUDENT EXPECTED YEAR INCOME

2024-2025

PII PERSONALLY IDENTIFIABLE INFORMATION

Student: _____

Student's Identification (ID) Number: _____

1. Will your income or your spouse's income be significantly less in 2024 than in 2022? Yes____ No____
2. If you answered "Yes" to #1, check the appropriate reason below and explain, giving the date your situation changed.

(a) Unemployment or change in employment *(explanation and date of occurrence; copy of letter of termination and/or stub of last paycheck.)*

(b) Divorce/separation *(date of occurrence)*

(c) Death of a spouse *(date of occurrence)*

(d) Disability of student or spouse *(explanation and date of occurrence)*

(e) One-time income (e.g., inheritance, moving expense allowance, back-year social security payments, etc...) Identify the source of income, the amount, and how the funds were spent or invested.

3. If 2 (a), (b), (c), or (d) is checked, provide the following information for:
□ 2024 Calendar Year **OR** □ July 1, 2024 through June 30, 2025

	Student	Spouse
Wages, salaries, tips (including severance pay, disability payments, and other income from work)	$	$
Other taxable income	$	$
Untaxed portions of IRAs or pensions	$	$
Veterans non-educational benefits	$	$
Child support to be received	$	$
Other untaxed income	$	$
Unemployment Compensation	$	$
TOTAL anticipated income for 2024	$	$

By signing this worksheet, I (we) certify that all the information reported to qualify for student aid is complete and correct. If spouse information is provided, he/she must also sign this form.

_____ _____

Student **Date** **Spouse** **Date**

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.