KANSAS STATE UNIVERSITY

2016-2017 Parent Estimated Income Form

Please complete and submit this form to:

Office of Student Financial Assistance
104 Fairchild Hall | 1601 Vattier Street
Manhattan, KS 66506-1104
Office 785-532-6420 | Toll free 877-817-2287 | Fax 785-532-7628
Website ksu.edu/sfa | Email finaid@ksu.edu

Student's Name (Last, First, MI) _____

Wildcat Identification Number _____

Parent's Email Address _____

Parent's Phone Number _____

Please provide the following.

❶ Estimate only the income for the parent or step-parent who has experienced the loss of employment.

❷ Submit the supporting documentation listed below. Additional documentation may be requested.

- ☐ The most recent year-to-date paystub(s).
- ☐ A letter from the employer documenting the last day of employment, such as a resignation, termination or separation letter. This must be on letterhead.
- ☐ A statement of severance payments and benefits from your employer.
- ☐ A statement of unemployment benefits (if applicable).

❸ If a line is left blank, you are certifying you have received no income from that source.

Estimated Income for January 1, 2016 - December 31, 2016		
Sources of Taxable Income	**Father**	**Mother**
Gross earnings from work		
Severance pay		
Gross unemployment compensation		
Business income		
Interest or dividend income		
Rental income		
Farm/ranch net income		
Taxable pension and/or annuity income		
IRA/Retirement account withdrawals		
Taxable Social Security Benefits/Disability		
Workers' Compensation		
Alimony received		
Sources of Untaxed Income	**Father**	**Mother**
Child support received for all children in the household		
Payments to tax-deferred pension and savings plans		
IRA deductions & payments to SEP, SIMPLE, Keogh		
Tax exempt interest		
Untaxed portions of IRA distributions or pensions		
Housing, food and other living allowances paid to you		
Veterans non-education benefits		
Other untaxed income		

Certification Statement

By signing this form, I certify that all the information reported is complete and accurate.

Signature of Parent on FAFSA(required) _____ Date

Digital signatures are not accepted.