

**OFFICE of FINANCIAL AID
LEHIGH UNIVERSITY
CHANGE of FINANCIAL CIRCUMSTANCES FORM
MID-YEAR UPDATE
Academic Year 2008-2009**

Request for Reevaluation of Need for: _____
First Name
M.I.
Last Name

Lehigh ID: _____

▶ This form is provided for use by families whose financial circumstances were reported to have changed, and whose income for 2008 was expected to be significantly lower than it was in 2007. Your student's financial aid eligibility was revised based on your reported lower income for 2008. It is now time to update those earlier estimates to determine spring semester eligibility.

▶ **BE SURE TO ATTACH YOUR MOST RECENT PAY STUB OR OTHER SUPPORTING DOCUMENTATION.**

▶ It is not advisable to be overly conservative when providing income estimates.

I. Please indicate the appropriate reason and the date of your family's change of circumstances.

	<u>Reason</u>	<u>Date</u> MM/DD/YYYY
A.	() Loss of employment or change in employment status	_____
B.	() Loss of earnings due to disability or natural disaster	_____
C.	() Loss of untaxed income or benefit	_____
D.	() Separation or divorce	_____
E.	() Death of parent	_____
F.	() Other. Please explain:	_____

THIS SECTION MUST BE COMPLETED

II. Please provide an update for the circumstance(s) surrounding the reduction in your 2008 family income.

(please complete reverse side)

III. Please estimate family income for the entire year, January 1, 2008 through December 31, 2008 in each area listed below. Use annual amounts in each space. (If none, enter zero.)

Expected 2008 Taxable Income:

G.	Wages, Salaries, Tips	Father/Stepfather	\$ _____
		Mother/Stepmother	_____
H.	Pension and Annuities to be Received (do not include Rollovers)		_____
I.	Interest and Dividend Income		_____
J.	Business or Farm Income		_____
K.	Capital Gains		_____
L.	Anticipated rental income		_____
M.	Alimony to be received		_____
N.	Unemployment Compensation		_____
O.	Severance Pay (include unused vacation and/or sick pay)		_____
P.	Social Security Benefits (taxable amount)		_____
Q.	Other Taxable Income (please explain):		_____
TOTAL TAXABLE INCOME (G. through Q.)			\$ _____

Expected 2008 Untaxed Income and Benefits:

Q.	Social Security Benefits		_____
R.	Public Housing		_____
S.	Housing Allowance (military, clergy, etc)		_____
T.	Retirement or Disability Benefits		_____
U.	Worker's Compensation		_____
V.	Payment to Tax-Deferred Pension/Savings Plans (paid directly or withheld from earnings) – include 401k and 403b		_____
W.	Untaxed Portion of Pension and Annuities		_____
X.	Untaxed Income Earned in a Foreign Country		_____
Y.	Child Support Received		_____
Z.	Other Untaxed Income (please explain):		_____
TOTAL UNTAXED INCOME (Q. through Z.)			\$ _____

IV. I certify that the information listed above is true and correct to the best of my knowledge and belief.

Parent's Signature: _____ **Date:** _____

*After completing Sections I, II, III and IV, return this form to:
Office of Financial Aid, Lehigh University, 218 W. Packer Avenue, Bethlehem, PA 18015*