

Last Name: _	
UO ID:	

2024-2025 Academic Year

Student Name:	UO ID:
Our office understands there may be circumsta	ances in which the information provided on the FAFSA does not always
accurately reflect a family's current financial si	ituation. Please complete this form if you would like our office to review
your special circumstance for consideration of	f additional financial aid eligibility. Also keep in mind that changes in aid
eligibility generally only pertain to the federal	student aid programs (such as the Pell Grant and Subsidized Direct

We may consider: Loss of employment or other income, separation or divorce, death of a parent, unusually high out-of-pocket medical and/or dental expenses, one-time source of income, other special circumstances

We generally do not consider: Location, domicile or household debt (e.g. personal loans and credit card debt)

Loan), not institutional or state aid programs. Not all changes result in additional aid eligibility.

- 1. After July 1, 2024 has passed and you have 6 months of documented income (limited exceptions may exist to submit earlier), use the table below to estimate 2024 income for parent(s), including stepparent if applicable, and student and provide documentation to substantiate estimates, such as: most recent (or final) pay stubs, pension statements, unemployment statements, and other relevant documents to support the figures provided.
- 2. Attach a statement to this form that addresses why your 2022 income reported on the FAFSA is not an accurate representation of your current financial situation. What has changed? Please explain how the projections were calculated including pertinent information, such as: dates of employment/unemployment, frequency of payments.

Please submit all documentation at one time as incomplete submissions will delay processing time.

Estimated 2024 Income (1/1/2024 – 12/31/2024) – do not leave any box blank, if none please put 0					
Taxable Income:	Parent(s)	Student	Untaxed Income:	Parent(s)	Student
Parent 1 - Gross wages (not net), including severance	\$	\$	Untaxed portion of pensions or IRA distributions (exclude rollovers)	\$	\$
Parent 2 - Gross wages (not net), including severance	\$	\$	Payments to tax-deferred pension and retirement plan, such as 401k	\$	\$
Business income/Loss	\$	\$	Veterans noneducation benefits	\$	\$
Unemployment	\$	\$	Public assistance	\$	\$
Alimony	\$	\$	Worker's compensation	\$	\$
Rental property income	\$	\$	Disability benefits	\$	\$
Interest/Dividends	\$	\$	Tax exempt interest income	\$	\$
Capital gains	\$	\$			
Taxable pension or IRA distribution	\$	\$	Other untaxed income, Source:	S	S
Taxable Social Security benefits	\$	\$	Additional Financial Info:		
Other taxable income, Source:	\$	\$	Taxable earnings from Federal Work-Study	\$	\$

By signing this worksheet, you certify that all the information reported is	complete and correct to the best of your
knowledge. Federal tax forms may be requested at a later time.	

Typed or auto-generated electron	Warning: If you purposely give false or misleading	
Parent Signature	Date	information, you may be fined, sent to prison, or both.
Student Signature	 Date	-

Office of Student Financial Aid and Scholarships

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