



DEPENDENT STUDENT REQUEST FOR REVISION FORM 2008-2009 ACADEMIC YEAR

Office of Financial Assistance
Villanova University • 800 Lancaster Avenue • Villanova, PA 19085-1685
Phone: (610) 519-4010 Fax: (610) 519-7599
Email: finaid@villanova.edu Website: www.finaid.villanova.edu

STUDENT INFORMATION (PLEASE PRINT OR TYPE)

NAME: _____ VU STUDENT ID NUMBER: _____

Villanova University provides special consideration for dependent applicants whose family is experiencing a reduction in income due to one of the following reasons: PLEASE CHECK APPLICABLE SITUATION(S).

- A. [] Death of Parent (death must have occurred AFTER January 1, 2008).

Date: _____ Relationship (Ex. mother/father)
Month/Day/Year

- B. [] Parent has retired.

Date of retirement: _____ Relationship (Ex. mother/father)
Month/Day/Year

Attach supporting documentation such as: final paycheck stub, monthly pension payment statement, documentation from employer regarding retirement.

Did you receive Stock Options or a lump sum payment as part of your retirement package? ___ yes ___ no

If yes, how much? \$ _____

What was your 2006 Adjusted Gross Income \$ _____
(Line 37 of Form 1040, or, Line 21 of Form 1040A)

- C. [] Recent separation or divorce of custodial parent.

Date of separation or divorce: _____
Month/Day/Year

Attach supporting documentation such as: copy of divorce decree, legal documentation of separation/divorce proceedings, proof of separate residences and any other pertinent documentation to substantiate current marital status. This Request for Revision will not be considered without documentation.

- D. [] Permanent and total disability of parent (must have occurred AFTER January 1, 2007).

Date: _____ Relationship (Ex. mother/father)
Month/Day/Year

Date disability benefits begin: _____

Attach supporting documentation such as: confirmation of disability from your health care provider, statement of benefits from workman's compensation and/or Social Security Disability.

- E. [] Parent has been unemployed, or has experienced a change in employment status for at least two full months. (Note: Reduction in overtime will not be considered as a change in employment status.)

Date: _____ Relationship (Ex. mother/father)
Month/Day/Year

Date unemployment benefits begin: _____

Attach supporting documentation such as: last paycheck stub, documentation from employer, statement of unemployment benefits.

Was severance pay received as part of your 2007 income? ___ yes ___ no

If yes, how much was received in 2007? \$ _____

What was your 2006 Adjusted Gross Income \$ _____
(Line 37 of Form 1040, or, Line 21 of Form 1040A)

- F. [] Untaxed income has ceased or been reduced.

Date: _____ Relationship (Ex. mother/father)
Month/Day/Year

Type of untaxed income that has ceased or been reduced: _____

List reason for cessation or reduction: _____

Please attach a separate explanation detailing all the reasons your family's 2008 income will be reduced and complete the remainder of this form. On the reverse side of this form please enter the parent(s)' estimated income for the 2008 income tax year.

Consideration of your special circumstance is based on all information being complete with supporting documentation submitted.

G. Complete both sections (Gross Taxed and Untaxed Income) below with income/resources (prior to exemptions, adjustments, or deductions) your family expects to receive from January 1, 2008 until December 31, 2008.

DO NOT LEAVE ANY BLANKS - IF NONE, ENTER ZEROS.

TOTAL 2008 GROSS TAXED INCOME

1. Wages, salaries, tips from father/stepfather	1. \$ _____
2. Wages, salaries, tips from mother/stepmother	2. \$ _____
3. Severance Pay	3. \$ _____
4. Pensions and annuities	4. \$ _____
5. Interest and dividend income	5. \$ _____
6. Business or farm income	6. \$ _____
7. Capital gains	7. \$ _____
8. Income received from rents after expenses paid for mortgage interest, taxes and insurance	8. \$ _____
9. Alimony which will be received	9. \$ _____
10. Unemployment Compensation	10. \$ _____
11. Projected IRA distribution	11. \$ _____
12. Any other taxed income (including Stock Options, Vacation or Sick Pay)	12. \$ _____
Total 2008 – Gross Taxed Income	\$ _____

TOTAL 2008 UNTAXED INCOME

1. Payments to tax-deferred pension and savings plans (paid directly or withheld from earnings). Include untaxed portion of 401 (k), 403 (b), 457 (h), 501 (c) (18) (D) plans.	1. \$ _____
2. Social Security benefits or SSI for all family members	2. \$ _____
3. Retirement or disability benefits	3. \$ _____
4. Worker’s Compensation	4. \$ _____
5. Welfare benefits including AFDC, ADC (excluding food stamps) or TANF	5. \$ _____
6. Untaxed portion of pensions	6. \$ _____
7. Living & housing allowances (excluding rent subsidies for low income housing) for clergy, military, and others (include cash payments or cash value of benefits)	7. \$ _____
8. Child support or maintenance payments which will be received for ALL children	8. \$ _____
9. Cash support or money paid on student’s behalf	9. \$ _____
10. Veterans benefits except student’s educational benefits	10. \$ _____
11. Railroad Retirement benefits	11. \$ _____
12. Any other untaxed income and benefits such as Black Lung Benefits, Refugee Assistance, etc.	12. \$ _____
13. Foreign income exclusion	13. \$ _____
14. Earned income credit	14. \$ _____
15. Untaxed money received, or paid on your behalf, not reported elsewhere on this form	15. \$ _____
16. Loans (home equity, line of credit, family members, business. Do not include Federal Stafford, PLUS or Alternative Loans.)	16. \$ _____
Total 2008 – Gross Untaxed Income	\$ _____

- **This form must be completed in its entirety**
- **Attach all supporting documentation**
- **Review of this information may or may not result in additional aid eligibility**
- **Availability of funds will determine if additional aid can be given as a result of a change in eligibility for financial assistance**
- **Request for Revision forms will not be reviewed until the student’s original application for the 2008/2009 academic year is complete and has been verified by the Office of Financial Assistance**

All information submitted on this form is true and correct, to the best of my knowledge. I understand that this Request for Revision Form is valid for the 2008- 2009 academic year only. I realize that my 2009-2010 aid year eligibility will be based on actual income from the year 2008.

Signature of Mother/Stepmother Date

Signature of Father/Stepfather Date

Signature of Student Date