

Financial Aid Appeal: Income Estimation Form

Student ID _____

Name _____



SHEPHERD
UNIVERSITY

Complete this form if you are requesting that the 2024 tax information on your FAFSA be replaced with estimated **2026** tax information. You must provide documentation of all listed income. This may include recent pay stubs with year-to-date earnings, W-2(s), a letter from employer stating your total earnings, etc. If none, you must enter zeros. **Appeals using this form should not be completed/submitted prior to July 15, 2026. A majority of the year must pass to accurately estimate income.**

2026 Gross TAXED Income	Parent #1	Parent #2	Student	Spouse
Income earned from work (<i>wages, salaries, tips, net business/ farm income</i>)				
Severance Pay				
Pensions and Annuities				
Alimony				
Unemployment Compensation				
Other				

2026 Gross UNTAXED Income	Parent #1	Parent #2	Student	Spouse
Payments to tax-deferred retirement				
Retirement or Disability Benefits				
Worker's Compensation				
Child Support				
Other				

My signature below certifies that the information provided above is true and correct to the best of my knowledge. I understand that if I purposely give false or misleading information, I may be fined, sentenced to jail, or both.

Student Signature

Date

Parent Signature (if dependent)

Date