



LAKE FOREST COLLEGE

2024 - 2025 Parent Income Change Form

Complete this form if the total income of the parent(s) who completed your FAFSA will be *significantly less* in 2024 than 2022. Note that the definition of "parent" has changed for students whose biological parents are divorced, separated or widowed. Please contact our office if you have questions, or are unsure if your decrease is "significant" enough to affect eligibility.

Please Print

Student's Name: _____ Lake Forest ID# or Last four of SSN: _____

I am a new student at Lake Forest I am a returning student at Lake Forest

Affected Parent: _____ Parent Completing this Form: _____

Parent's Daytime Phone: (_____) _____ - _____ Parent's E-Mail: _____

➤ Step 1. Identify the date of each change.

➤ Step 2. Identify what changed. Examples: job loss, decrease in pay, one-time income, rollover, unemployment ended, etc.

➤ Step 3. Provide other relevant details we should know. Examples: certainty of, reason(s) for and duration of the change(s).

➤ Step 4. Provide estimated income for every line item, from July 1, 2024 to June 30, 2025

Income. Type

Income from Work, Parent 1 *; First Name: _____	<input type="checkbox"/> Will be \$0	\$ _____
Income from Work, Parent 2 *; First Name: _____	<input type="checkbox"/> Will be \$0	\$ _____
Unemployment Compensation	<input type="checkbox"/> Will be \$0	\$ _____
Other Taxable Income #	<input type="checkbox"/> Will be \$0	\$ _____
Untaxed Income ^	<input type="checkbox"/> Will be \$0	\$ _____

* Found on W-2s or these items (2022 line references): IRS Form 1040 (or 1040-NR) line 1z + Schedule 1, line 3 +_6

Examples include taxable portion of interest/dividends, capital gains, pension, rent, S-Corporations, etc.

^ Examples include tax-exempt interest (1040 line 2a) untaxed IRA distributions (1040 line 4a-4b), untaxed pension (1040 line 5a-5b), IRA deductions and payments to self-employed SEP, SIMPLE and qualified plans (1040 Schedule 1, lines 16 + 20). **Do not include** payments to tax-deferred pension and retirement savings plans.

➤ Step 5. Signature

Certification: All information provided is true and complete to the best of my knowledge. I agree to provide any documentation that will verify the accuracy of this information. I understand that if I purposely give false or misleading information, I may be fined up to \$20,000, sent to prison or both.

Parent's Signature – we cannot accept a typed signature _____ Date _____

If possible, please return as a .pdf by email along with any applicable supporting documents. It may also be faxed or mailed.

Office of Financial Aid ♦ 555 North Sheridan Road ♦ Lake Forest Illinois 60045-2338
lakeforest.edu/finaid ♦ finaid@lakeforest.edu ♦ Phone & Fax: 847-735-5103

Office Use Scanned Data Entry Done Doc'n Complete Yes No If "no" family notified ___/___ Initials/Date: _____

Orig EFC: _____ Adj EFC: _____ Wk, P1 _____ Wk, P2 _____ AGI _____ Untxd _____ TxPd (PF / Hand Calc) _____

Notes: _____ NEW RETG