2015-2016 REQUEST FOR ADJUSTMENT FORM

ADJUSTMENTS TO EXPECTED FAMILY CONTRIBUTION (EFC)

Student Name: ___________________________ Student ID or SSN: ____________

Your answers to the following questions may result in a decrease to your Expected Family Contribution (EFC). A decrease in your EFC may increase your eligibility for grants, need-based loans, and/or Work-Study. If your responses meet the percentage requirements, you will receive a form asking you to provide more specific information and documentation.

Reduction in Income:

1. If you, the student (and spouse), expect a **25% or greater decrease** in your TOTAL taxed and untaxed 2015 income (compared to 2014 income), enter your estimated 2015 income:
   - 2015 student estimated total income $__________

2. If your parent(s) expect a **25% or greater decrease** in their TOTAL taxed and untaxed 2015 income (compared to 2014 income), enter their estimated 2015 income:
   - 2015 parent estimated total income $__________

Medical Expenses:

3. If you, the student (and spouse), PAID medical costs in 2014 equal to **5% or more** of your TOTAL 2014 income, enter the amount of medical costs paid. DO NOT INCLUDE EXPENSES PAID BY INSURANCE, only those paid by you:
   - Medical costs paid by student in 2014 $__________

4. If your parent(s) PAID medical costs in 2014 equal to **5% or more** of their TOTAL 2014 income, enter the amount of medical costs paid. DO NOT INCLUDE EXPENSES PAID BY INSURANCE, only those paid by your parent(s):
   - Medical costs paid by parent in 2014 $__________

Signature(s) and Certification:

I certify that all information reported to qualify for federal student aid is complete and correct.

__________________________
Student Signature (handwritten, not typed) Date ____________________________

__________________________
Parent Signature (handwritten, not typed) Date ____________________________

* (must provide parent signature if reporting adjustments for Items 2 and/or 4)

Submit form to: UW Colleges Student Financial Aid Office
780 Regent St, Suite 130
Madison, WI 53715-2635