If yours or your parent's financial situation has changed from what was reported on the 2024-2025 Free Application for Federal Student Aid (FAFSA), use this form to request an evaluation of your financial aid eligibility. Changes in financial situation include but are not limited to loss of job or reduction in pay, unusually high medical expenses, or receipt of one-time income reported on the FAFSA. Please note, we reserve the right to correct information on the FAFSA, and to select students for verification if there is conflicting information.

Submission of this form does not guarantee an adjustment to your financial aid.

Complete the following steps:

- Write a detailed statement explaining your situation and the change in your financial situation.
- Provide supporting documentation that relates to the change in financial situation.
- Complete Sections A, B, C & D.
- Submit this form to the Office of Financial Assistance through Self-Service.

Section A - Student Information (Please Print Clearly)

UIN :	Email :	
Last Name:	Current Address :	
First Name:	City & State :	
M.I. :	Zip Code :	
Parent 1 :	Parent 2 :	

Section B - Reasons for the Change of Financial Situation

Please state the reason for the change in your financial status (attach additional pages as needed) :

CFSD-O

University of Illinois Springfield - Office of Financial Aid

2024-2025 Change of Financial Situation - Dependent Student

Section C – Anticipated Income for 2024

Report all anticipated taxable and nontaxable 2024 income (January 1, 2024 to December 31, 2024).

Taxable Income	Parent 1	Parent 2	Student
Wages/salaries/tips/severance	\$	\$	\$
Business income (self-employment)	\$	\$	\$
Other taxable income (i.e., unemployment compensation, social security, taxable pension, taxable 401K, etc.)	\$	\$	\$
Other taxable income (i.e., unemployment compensation, social security, taxable pension, taxable 401K, etc.)	\$	\$	\$
Total Taxable Income	\$	\$	\$
Nontaxable Income	Parent 1	Parent 2	Student
Other nontaxable income (i.e., worker's compensation, disability income, untaxed pension, etc.)	\$	\$	\$
Child Support Received	\$	\$	\$
Total Nontaxable Income	\$	\$	\$

Possible Supporting Documents:

Copy of parent's and student's signed 2022 IRS Federal Tax Return and IRS Schedules 1, 2, and 3

Copy of parent's and student's signed 2023 IRS Federal Tax Return and IRS Schedules 1, 2, and 3

Copies of all student and parent 2022 and/or 2023 W-2 forms

Current pay statements with year-to-date earnings shown

Documentation of a life event, reduced benefits, unusual medical expenditures, and/or employment changes

Other related supporting documentation

Section D - Statement of Certification

I certify that the information provided on this form and any attachments are true and correct. Additionally, it is understood that I must notify The Office of Financial Assistance if the situation outlined in this request changes. If I underestimate my anticipated income, I understand that I may be required to repay previously awarded financial aid. I may also have future Change of Financial Situation requests denied.

Student Signature

Date

Parent Signature

Date