



SOUTHWESTERN UNIVERSITY

Financial Aid Office
PO Box 770
Georgetown, TX 78627
Phone: 512-863-1259
Fax: 512-863-1507

2024-2025 Anticipated Income Form for Parents of Dependent Students

Student Name: _____ SU ID# _____
Last First

Parent Name: _____ Phone _____
Last First

Parent's Primary Email Address

Please provide the best possible estimates of your projected income for the calendar year January 1, 2024 through December 31, 2024. The Financial Aid Office may request additional documentation.

Source of income	Projected amount
Parent 1 anticipated income from work in 2024:	
Parent 2 anticipated income from work in 2024:	
Taxable income from other sources: <i>(examples: Interest bearing accounts, pensions, unemployment compensation, severance, etc.)</i> List the source(s) of taxable income: _____ _____ _____	
Untaxed Income: <i>(Examples: Child Support, Social Security, Welfare, worker's compensation, cash received, etc.)</i> List the source(s) of untaxed income: _____ _____ _____	
TOTAL PROJECTED INCOME FOR 2024:	

Signatures and Certification:

- I certify that all of the information on this form is true and complete to the best of my knowledge.
- I understand that the SU Financial Aid Office may request additional documentation in support of the information provided
- I understand that submission of this form does not guarantee an increase in financial aid
- I understand that purposely giving false or misleading information is subject to disciplinary action and a federal fine of up to \$20,000 and/or federal imprisonment.

Printed student name _____ Student Signature _____ Date _____

Printed Parent/Step-Parent Name _____ Parent/Step-Parent Signature _____ Date _____

Please return completed form to: Financial Aid Office, Southwestern University, PO Box 770, Georgetown, TX 78627-0770
Phone: (512) 863-1259 Fax: (512) 863-1507 Email: finaid@southwestern.edu
The Financial Aid Office is located in the Wilhemina Cullen Welcome Center