



**OXY FINANCIAL AID
INCOME UPDATE- STUDENT
2011-2012**

STUDENT'S NAME: _____

OXY ID: _____
(New Students Leave Blank)

*Occidental College ~ Office of Financial Aid ~ 1600 Campus Road ~ Los Angeles, CA 90041
323.259.2548 ~ 323.341.4961 (fax) ~ finaid@oxy.edu ~ www.oxy.edu/finaid*

You are being asked to complete this form because you have indicated a change in your financial circumstances. Complete only the sections that apply to your current situation. If you would like to provide additional information, attach a letter or use the back of this form.

ANTICIPATED INCOME (July 1, 2011 to June 30, 2012):

Total Anticipated Earnings from Work by Student: \$ _____

Total Anticipated Student Earnings from Interest and Dividends: \$ _____

Total Anticipated Student Profit from Business: \$ _____

Other Taxable Student Income (please circle all that apply): \$ _____
(rental income, alimony, pensions, unemployment, annuities, capital gains, royalties, partnerships, estates, trusts, severance payments, etc.)

Other Untaxed Student Income (please circle all that apply): \$ _____
(disability benefits, social security benefits, supplemental security income, welfare benefits, workman's compensation, cash support from others, etc.)

TOTAL \$ _____

Provide a brief explanation outlining the reason for this change. If any of the following apply, you must provide documentation that substantiates this change such as: termination notice, death certificate, legal separation or divorce decree, or any other documents that support this change.

CERTIFICATION

I certify that all information reported on this form and any attachments and subsequent information provided to the Occidental College Financial Aid Office is true, complete, and accurate to the best of my knowledge. I understand that false statements or misrepresentations will be cause for denial, reduction, withdrawal, and/or repayment of financial aid.

Student Signature

Date