Boston University School of Social Work

2015/2016 REQUEST FOR ALTERNATE COMPUTATION

STUDENT’S NAME ______________________________________ BU ID NUMBER ______________________

Your federal aid eligibility is determined in part by your base year (2014) income with the assumption that you will earn a comparable amount during your 2015/2016 enrollment. If this is not the case, your expected year resources may be used to determine your eligibility if you adequately explain why they are a better indicator of your financial strength. If you will earn less between June 2015 and May 2016 than you did in 2014, list below your anticipated gross earnings and explain why they will be less. Please note that only complete information can be considered.

Expected earnings for:

<table>
<thead>
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<tbody>
<tr>
<td>STUDENT:</td>
<td>$__________</td>
<td>$__________</td>
</tr>
<tr>
<td>SPOUSE (if applicable)</td>
<td>$__________</td>
<td>$__________</td>
</tr>
</tbody>
</table>

EXPLANATION:

________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________
________________________________________________________________________________________

STUDENT’S SIGNATURE ______________________________________ DATE __________
SPOUSE’S SIGNATURE (if applicable) ______________________ DATE __________