



Complete this form only if your 2023 income was *greater than* \$11,000 *and* your 2025 income will be significantly less.
 3/4 If you are married today, you must include your spouse's estimated income even if you were not married in 2023.

Please Print

Student's Name _____ Lake Forest ID# _____ Last four of SSN: _____

%o

If possible, please return as a .pdf by email along with any applicable supporting documents. It may also be faxed or mailed.

Office of Financial Aid | 555 North Sheridan Road | Lake Forest Illinois 60045-2338
 lakeforest.edu/finaid | finaid@lakeforest.edu | Phone & Fax: 847-735-5103

Office Use Scanned % Data Entry Done % Doc'n Complete % Yes % No If "no" family notified ___/___ Initials/Date: _____
 Orig EFC: _____ Adj EFC: _____ Wk, P1 _____ Wk, P2 _____ AGI _____ Untxd ___ TxPd (PF / Hand Calc) _____
Notes: _____ NEW RETG