

UNTAXP _____

Ferris State University Office of Scholarships & Financial Aid

2026-2027 UNTAXED INCOME WORKSHEET - PARENT

DOCUMENTS MAY BE SUBMITTED VIA U.S. MAIL, FAX, EMAIL.

FSU Office of Scholarships & Financial Aid
1201 S. State Street, CSS 101, Big Rapids, MI 49307
Phone: 231 591-2110 Fax: 231 591-2950
Email: finaid@ferris.edu

Kendall College of Art & Design
17 Fountain Street NW, Grand Rapids, MI 49503
Phone: 616 451-2787 Fax: 616 831-9689
Email: kcadfinaid@ferris.edu

STUDENT NAME: _____ **ID #:** _____

TO BE COMPLETED BY THE PARENT(S) OF THE DEPENDENT STUDENT LISTED ABOVE.

The Department of Education is requiring that you answer the following questions for the verification process.

1. Child support received for any of your children in **2024** \$ _____ (Do not include foster care or adoption payments)
2. Taxable Grant/Scholarship Aid received in **2024** \$ _____. You indicated on your FAFSA that your adjusted gross income on your tax return included grant and/or scholarship aid. If the amount you list is anything other than zero, please provide a signed copy of your 2024 federal 1040 and all 2024 W2(s).
3. Need based aid (work study) earned in **2024** \$ _____. Please provide documentation, such as 2024 W2(s).

By signing this form, I certify that all the above information is complete and correct. Parent must sign this form in **ink**. **Electronic or typed signatures are NOT acceptable.**

Parent Signature

Date