



**Villanova University**

**Student's Name:** \_\_\_\_\_ **Student ID Number:** \_\_\_\_\_  
 (8 Digit Number)

**To better understand the circumstances you are facing, please check all applicable situations and attach the supporting documentation:**

A.	<input type="checkbox"/>	<b>Death of Spouse:</b>	Date of Death: _____ <i>Month/Day/Year</i>
		<b><u>Supporting Documentation:</u></b>	
		<ul style="list-style-type: none"> <li>• Copy of Death Certificate</li> </ul>	
B.	<input type="checkbox"/>	<b>Divorce or Separation:</b>	Date of Divorce or Separation: _____ <i>Month/ Year</i>
		<b><u>Supporting Documentation:</u></b>	
		<ul style="list-style-type: none"> <li>• Copy of Divorce Decree, if divorced</li> <li>• Copy of Legal Separation Agreement or Proof of Separate Residences (copy of mortgage or lease), if separated</li> </ul>	
C.	<input type="checkbox"/>	<b>Change in Student's / Spouse's Employment Status*:</b>	Date of Change: _____ <i>Month/Day/Year</i>
		<b><u>Supporting Documentation</u></b>	Individual Who Experienced Change: _____ <i>Student/Spouse</i>
		<ul style="list-style-type: none"> <li>• Notice of Lay Off/Termination from Employer</li> <li>• Copy of Last Pay Stub from prior employer</li> <li>• Notice of Eligibility for Unemployment Benefits</li> <li>• Copy of Full Severance Agreement, if applicable</li> <li>• 3 Recent Pay Stubs from current employment, if employed</li> </ul>	Date Unemployment Benefits Began: _____ <i>Month/Day/Year</i>
			Was Severance Pay Received? _____ <i>Yes or No</i>
			If yes, what is the total amount of severance that was/will be received in 2023? _____ <i>Total Amount</i>
		*Attach all supporting documents, if possible	Date of Retirement, if applicable: _____ <i>Month/Day/Year</i>
		*Loss of Bonus income is not considered as a change to employment status	
		*Must wait 60 days from lay-off/termination before submitting request	
D.	<input type="checkbox"/>	<b>Permanent and Total Disability:</b>	Date of Disability: _____ <i>Month/Day/Year</i>
		<b><u>Supporting Documentation:</u></b>	Individual Who is Disabled: _____ <i>Student/Spouse</i>
		<ul style="list-style-type: none"> <li>• Confirmation of Disability from HealthCare Provider</li> <li>• Statement of Benefits from Workmen's Compensation</li> <li>• Statement from Social Security Disability</li> </ul>	Date Disability Benefits Began: _____ <i>Month/Day/Year</i>
E.	<input type="checkbox"/>	<b>Untaxed Income has Ceased or been Reduced:</b>	Date of Change: _____ <i>Month/Day/Year</i>
		<b><u>Supporting Documentation:</u></b>	Individual with Change in Income: _____ <i>Student/Spouse</i>
		<ul style="list-style-type: none"> <li>• Proof of Cessation or Reduction</li> </ul>	Type of Untaxed Income: _____
			Reason for Change: _____

**CONTINUE TO THE NEXT PAGE**



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Student ID Number:

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Complete both sections (Gross Taxable and Untaxable Income) below with income/resources (prior to exemptions, adjustments, or deductions) you / your spouse, if applicable, have received and expect to receive from January 1, 2023 until December 31, 2023.

**DO NOT LEAVE BLANKS – IF NONE, ENTER ZEROS.**

**TOTAL 2023 GROSS TAXABLE INCOME** (January 1, 2023 – December 31, 2023)

1. Wages, salaries, tips from Student	\$
2. Wages, salaries, tips from Spouse	\$
3. Severance Pay	\$
4. Pensions/Annuities	\$
5. Interest and Dividend Income	\$
6. Business, Farm, or Rental Income	\$
7. Capital Gains	\$
8. Alimony which will be received	\$
9. Unemployment Compensation	\$
10. Projected IRA, KEOGH and/or SIMPLE payment/distribution (include lump sum or early withdraw from an IRA or retirement fund)	\$
11. Any other taxable income: (indicate source of taxable income, i.e. tax refund, stock options, etc.)	\$

**Total 2023 – Gross Taxable Income \$** \_\_\_\_\_

**TOTAL 2023 UNTAXABLE INCOME** (January 1, 2023 – December 31, 2023)

1. Payments to Tax Deferred Pensions (paid directly or withheld from earnings, i.e. 401(k), 403(b), etc.)	\$
2. Child Support Received	\$
3. Workmen's Compensation	\$
4. Social Security benefits or SSI for all family members	\$
5. Retirement or Disability Benefits	\$
6. Any other untaxable income: (please indicate the source of the untaxed income, i.e Living/Housing Allowances Money received or paid on family or student's behalf)	\$

**Total 2023 – Gross Untaxable Income \$** \_\_\_\_\_

- Attach all supporting documentation where possible and submit using our Dropbox found on our website [finaid.villanova.edu](http://finaid.villanova.edu)
- Review of this information may or may not result in additional aid eligibility
- Availability of funds will determine if additional aid can be given as a result of a change in eligibility for financial assistance
- Submission of an appeal does not prevent the accrual of late fees on unpaid balances. All balances should be paid based on the current aid offer
- Request for Revision forms will not be reviewed until the student's original application for the 2023-2024 academic year is complete and 2021 tax documents are received and reviewed
- We reserve the right to request a copy of the 2022 Federal Tax Return, W-2 forms and other pertinent documents

All information submitted on this form is true and correct, to the best of my knowledge. I/We understand that if any of the projections change, we must notify the Office of Financial Assistance in writing. I/We understand that this Request for Revision Form is valid for the 2022-2023 academic year only.

\_\_\_\_\_  
Name of Student Completing Form

\_\_\_\_\_  
Signature of Student Completing Form

\_\_\_\_\_  
Date