

Please note: Appeals submitted after April 1, 2026, may not be considered (or Dec. 1, 2025, if the student is graduating after fall semester).

STUDENT PROJECTED RESOURCE QUESTIONNAIRE 2025-2026

Student's name: Last

M.I.

Phone:

U-M ID number (eight digits)

Email: _

This information is required to process your request for income or resource adjustments that affect your eligibility for financial aid for the 2025-2026 academic period. Please allow an initial notice to be processed before submitting this request. Then contact our office to help you determine if completing this form will improve your financial aid package. The U-M Office of Financial Aid makes every effort to respond to appeals within three weeks of receiving the request.

DOCUMENTATION:

Please submit your **2023 and 2024 federal tax return** and W-2 forms, if they are not already on file with our office, along with any other documents requested below.

STEP 1: STUDENT'S DECREASE IN INCOME

Please review the circumstance below. If your situation fits, complete the questions asked and provide all requested information and/or documentation.

Your income from 2023 reported on the 2025-2026 FAFSA will decrease because you have returned or will return to school after at least one year of full-time employment.

I am no longer working at all and have returned to school full-time

I am continuing to work while I am a student but I am currently unemployed

First

I am married and my spouse is newly unemployed

1. List the name and address of your full-time employer:

Name: _____

Street address:	

2. List the dates of your full-time employment: _____

 Provide a letter from your previous employer that confirms your employment dates and specifies that you are no longer employed on a full-time basis, along with a signed and dated 2023 federal tax return, if it has not already been submitted to our office.

City/State/Zip:

(month/year) to

4. Estimate your Gross Income for: Jan.-April 2025:

May–Aug. 2025:

Sept.–Dec. 2025:



\$_____

STEP 2: CERTIFICATION AND AUTHORIZATION

The information provided on this form is complete and correct to the best of my ability.

Date

(month/year)