



Alternate Documentation of Income

For the 15% Formula

PLEASE READ THE INSTRUCTIONS ON THE FOLLOWING PAGE PRIOR TO COMPLETING AND SUBMITTING THIS FORM.

SECTION 1: BORROWER IDENTIFICATION

Name	Account Number
Street Address	
City, State, Zip Code	
Primary Phone () _____ <input type="checkbox"/> Landline <input type="checkbox"/> Mobile	Alternate Phone () _____ <input type="checkbox"/> Landline <input type="checkbox"/> Mobile
Employer	Employer Phone Number () _____
Employer Street Address	
Employer City, State, Zip Code	

SECTION 2: FAMILY SIZE AND FEDERAL TAX INFORMATION

Family Size:	Filing Status : <input type="checkbox"/> Single <input type="checkbox"/> Married <input type="checkbox"/> Married filing separately
--------------	---

SECTION 3: SOURCE OF INCOME

Taxable Income			
Income Type	Monthly Average Amount		Provide the Following Proof
	Borrower	Spouse	
Employment Income			2 most recent paystubs (dated within the past 90 days)
Unemployment Benefits			Award letter or paystub (dated within the past 90 days)
Alimony			Divorce decree
Other Taxable Income			Evidence of source and amount (dated within the past 90 days)
Non-Taxable Income			
Child Support			Divorce decree
Worker's Compensation			Award letter or paystub (dated within the past 90 days)
Social Security			Award letter (dated within the past 90 days)
Other Non-Taxable			Evidence of source and amount (dated within the past 90 days)
<input type="checkbox"/> Check this box if you have no income and are entirely supported by someone other than a spouse. Explain how you are supported in this space below. Attach a separate page if necessary.			

SECTION 4: PREFERRED DUE DATE (CHECK ONE)

7TH 15TH 22ND

Borrower's Signature

Date

I certify that the information on this form is true and correct. I authorize UHEAA to contact me regarding my request or my loan(s), including repayment of my loan(s), at the number that I provide on this form or any future number that I provide for my cellular telephone or other wireless device using automated telephone dialing equipment or artificial or prerecorded voice or text messages.

INSTRUCTIONS FOR COMPLETING THE ALTERNATE DOCUMENTATION OF INCOME FOR THE 15% FORMULA FORM

The Alternate Documentation of Income for the 15% Formula Form should *only* be completed if (1) you did not file a federal income tax return for the two most recently completed tax years, (2) your AGI from your most recently filed federal income tax return does not reasonably reflect your current income (due to circumstances such as the loss of or change in employment).

You must provide documentation of all household income from all sources. The documentation you provide must demonstrate your monthly income. For example, if you are paid two times per month, you must provide *at least* two paystubs.

The date on any supporting documentation you provide must be dated in the last 90 days. Copies of original documentation are acceptable

Note: Your family size includes you, your spouse, and your children (including unborn children who will be born before the end of the calendar year), if the children will receive more than half their support from you. Your family size includes other people only if they live with you now, receive more than half their support from you now, and will continue to receive this support from you for the year for which you are certifying your family size. Support includes money, gifts, loans, housing, food, clothes, car, medical and dental care, and payment of college costs.

The completed form and supporting documentation may be returned to UHEAA by fax to (801) 366-8430 or by mail to:

UHEAA
PO BOX 145111
SALT LAKE CITY UT 84114

****Failure to provide acceptable supporting documentation of your income will cause a delay in calculating your payments.*