Office of Financial Aid 100 East 8th Street, Suite 230 Holland, MI 49423 P: 616.395.7765 | F: 616.395.7160 finaid@hope.edu hope.edu/financialaid

Widowed Student Disclosure

2026-2027

Student Name:	Hope College ID Number:	
It is our understanding that you were widow financial assistance, we need clarification req	-	Γο determine your 2026-27 eligibility for
Date you were widowed://		
Submit a signed copy of your 2024 and 2	025 federal income tax return with	n W-2 forms.
Current number in family size		
Current total of cash, savings and checking	gaccounts	\$
Current net worth of investments, including	g real estate	\$
Don't include the home you live in. Net wor minus any debts owed against them.	th is the value of the investments	
Current net worth of businesses and invest	ment farms	\$
Enter the net worth of your businesses or for worth is the value of the businesses or farms them.		
Certifications and Signatures		
Each person signing below certifies that all of information was reported on the FAFSA mus you may be fined, sent to prison, or both.		
Student Signature:	Date Signed:	
(signature must be	in ink)	