



LAKE FOREST
COLLEGE

2025 - 2026 Unusual Expense Form

Complete this form only if the parent whose information is reported on your FAFSA paid in 2024 or will pay in 2025 at least \$2,000 for non-elective expenses.

Please Print

Student's Name: _____ Lake Forest ID# or Last four of SSN: _____

I am a new student at Lake Forest I am a returning student at Lake Forest

Parent Completing this Form: _____

Parent's Daytime Phone: (_____) _____ - _____ Parent's E-Mail: _____

➤ Step 1. Identify the Type of Expense

- Auto Repairs Bankruptcy (Chapter 13) Child Support Dependent Care Funeral Costs Home Repairs
 Legal Fees State taxes paid Support of Extended Family Tax Debt, prior year Unreimbursed Busn Expenses
 Other _____

➤ Step 2. Identify the year in which the *total you actually paid* (not just billed) was the largest, and the amount paid.

When did the expense occur? 2024 2025

How much did or will you pay for these expenses in that year? \$ _____

If 2024 is reported, how will 2025 expenses compare? Similar Significantly less (estimated amount) \$ _____

➤ Step 3. Did you report this expense to us for the 2024-2025 academic year?

Yes No Not sure

➤ Step 4. Describe the expense(s) including general dates incurred/paid, and if it was a "one-time" cost or recurring payment.

Please Print

➤ Step 5. Document the Expense(s).

Include a representative sample of bills, invoices, canceled checks, itemized list of expenses, etc. **by .pdf if possible.**

➤ Step 6. Signature

All information provided is true and complete to the best of my knowledge. I agree to provide any documentation that will verify the accuracy of this information. I understand that if I purposely give false or misleading information, I may be fined up to \$20,000, sent to prison, or both.

Parent's Signature – we cannot accept a typed signature

Date

If possible, please return as a .pdf by email along with any applicable supporting documents. It may also be faxed or mailed.

Office of Financial Aid ♦ 555 North Sheridan Road ♦ Lake Forest Illinois 60045-2338
lakeforest.edu/finaid ♦ finaid@lakeforest.edu ♦ Phone & Fax: 847-735-5103

Office Use Scanned Data Entry Done Doc'n Complete Yes No If "no" family notified ___/___ Initials/Date: _____

Orig EFC: _____ Adj EFC: _____ Total Expense Used: _____

NEW RETG

Notes: