



LAKE FOREST
COLLEGE

2024 - 2025 Unusual Expense Form

Complete this form if the parent whose information is reported on your FAFSA paid in 2023 or will pay in 2024 **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 Covid-Related Dependent Care Funeral Costs
- Home Repairs Legal Fees 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? 2023 2024 What did (or will) you pay for expense(s) in that year? \$ _____

If 2023 is reported, how will 2024 expenses compare? Similar Significantly less (estimated amount) \$ _____

> Step 3. Did you report this expense to us for the 2023-2024 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: