

2026 - 2027 Unusual Expense Form

Complete this form only if the parent whose information is reported on your FAFSA paid in 2025 or will pay in 2026 **at least \$2,000** for uncommon, non-elective expenses. **Do not include** credit card debt, pets, trips, etc., or the same expenses submitted in a prior year. **Do not include** healthcare costs or educational expenses, as these are reported on their own unique form(s).

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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	e: ()	P	arent's E-Mail:		
> Step 1. For each expense, identify the type, year, and amount actually paid (or expected to be paid) in that year.					
☐ Auto Repairs	□ 2025 \$	_ 2026 \$	_ □ Bankruptcy (Chpt13)	□ 2025 \$ □ 20)26 \$
☐ Child Support	2 025 \$	2026 \$	■ Dependent Care	□ 2025 \$ □ 20)26 \$
☐ Funeral Costs	2 025 \$	2 026 \$	☐ Home Repairs	□ 2025 \$ □ 20)26 \$
☐ Legal Fees	2 025 \$	2 2026 \$	■ State Taxes	□ 2025 \$ □ 20)26 \$
☐ Support to Relatives	2 025 \$	_ 2026 \$	_ □ Tax Debt, prior year	2 025 \$ 2 0)26 \$
☐ Other	□ 2025 \$	_ 2026 \$	➤ Details:		
> Step 2. Describe what makes the expense(s) unique and if it was a "one-time" event or a recurring bill. If recurring, provide the known or estimated ending date. Please Print					
> Step 3. Document the Expense(s).					
Include a representative sample of bills, invoices, canceled checks, itemized list of expenses, etc. by .pdf if possible.					
> Step 4. Did you report a similar expense in a prior academic year?					
☐ Yes ☐ No ☐ Not sure					
➤ Step 5. 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 car	nnot accept a typed sig	gnature	 Date		
If possible, please return as a .pdf by email along with any applicable supporting documents. It may also be mailed or faxed. Office of Financial Aid ◆ 555 North Sheridan Road ◆ Lake Forest Illinois 60045-2438 lakeforest.edu/finaid ◆ finaid@lakeforest.edu ◆ Phone: 847-735-5103 ◆ Fax: 847-735-6271					
Office Use Scanned	Data Entry Done 🗆 🔝	Doc'n Complete □Yes	□No If "no" family notified	_/ Initials/Date:	
Orig EFC:	_ Adj EFC:	Total Expens	e Used:	. NE	W RETG
Notes:					