| mvUTSA ID: | Student's First Name: | Last: |
|---------------|------------------------|-------|
| 111y 013/11D. | _ Student Strist Name. | Ed3t |



2024-2025 Special Circumstance - Parents' Additional Expense Form

Directions: The Student Aid Index (SAI) was determined from the income and asset information provided on the FAFSA. Since parents may experience additional expenses which could impact their ability to contribute to their child's education, we may be able to make adjustments to the SAI calculation and a re-evaluation of your student's financial aid could occur if approved. Please select from one of the following options if you have expenses that we may not have included, or are of an extraordinary nature, and submit the requested documentation to be considered for review. Please note that changes resulting from this review do not guarantee an increase in aid.

How to Submit Form: Upload through the the **Document Uploader**.

• <u>Fields to select on the Document Uploader:</u> Department: Financial Aid & Scholarships; Term: 2024-2025; Category: Special Circumstances Forms; Category 2: Parent Additional Expense; Document: Parent Additional Expense form

STEP 1: ATTACH A LETTER OF EXPLANATION WINNINGSHIPM

You must provide a detailed, signed letter supporting your request based off the reason(s) selected below.

Check the reason(s) for the expense adjustment and attach the required documentation for each situation. <u>Receipts must be dated within the time of enrollment in the current academic year.</u> This will not be reviewed if the expenses occurred before the first day of the semester in which you are enrolled.

Extended Family Support (for family members outside those listed in your household)

- Provide copies of <u>paid</u> receipts of your expenses for extended family support.
- In your letter, detail the type of support you provide and the dollar amount you will spend during the school year. Also include names of individuals you support along with their relationship to you

Private School Tuition Expenses (for children in elementary or high school)

- Attach photocopies of <u>paid</u> receipts indicating the amount paid monthly (should include school's contact information). If the receipt does not have contact information, attach a statement on the school's letterhead confirming tuition costs.
- In your letter, detail the names and ages of children that are attending the private school.

Unusual Debts (non-discretionary debts only to be considered, in excess of 12% of the FAFSA income protection allowance)

- Attach photocopies of <u>paid</u> receipts for bills due to unusual debts.
- Unusual debts include expenses from failed businesses, education loans, non-discretionary personal debts, credit card debts due to paying for living expenses while unemployed, and legal fees for divorce or adoption.
- Recreational or discretionary credit card debt will not be considered.

Unusual Medical/Dental/Optical Expenses (Extraordinary additional medical, optical, or dental expenses, in excess of 11% of the FAFSA income protection allowance)

• Attach photocopies of <u>paid</u> receipts for medical/dental/optical bills (not including co-pays).

Other Expenses

Attach photocopies of <u>paid</u> receipts for bills.

Continue on Page 2

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|---|--|--|---|
| STEP 3: CERTIFICA | TION AND SIGNATURES \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | | |
| Certification Statem | nent: Your signature on this document conf | irms your acknowledgment of the following: | |
| Providing false inUnderestimatingYou have read ea | | | |
| Student Signature: | | Phone or Email: | Date: |
| Father/Stepfather Si | ignature: | Phone or Email: | Date: |
| Mother/Stepmother | Signature: | Phone or Email: | Date: |
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