



OFFICE OF FINANCIAL AID

P.O. Box 7001
Longview, Texas 75607-7001
903-233-4350
FAX 903-233-4302
e-mail: finaid@letu.edu

FAITH BRINGS US TOGETHER.
INGENUITY SETS US APART.

2010-2011

Unusual Circumstance Request

If you have unusual circumstances which may affect your need for student financial aid (such as loss of employment or major medical expenses), please use the form on the reverse side to request a review of your individual situation.

Upon receipt of the completed form and documentation, we will review your request and make any adjustments that are possible within the federal guidelines.

We look forward to working with you throughout the financial aid awarding process. If you have any questions, please contact our office.

Sincerely,

A handwritten signature in black ink that reads 'Delinda Hall'.

Delinda Hall
*Senior Director of Enrollment Services
and Financial Aid*

LETOURNEAU UNIVERSITY 2010-2011 UNUSUAL CIRCUMSTANCE REQUEST

LeTourneau University will review your financial situation and make any adjustments allowable by law, which may increase your eligibility for financial aid. This form is used to report financial changes since you filed the Free Application for Federal Student Aid (FAFSA). Support your circumstances with the appropriate documentation noted below.

This request will be reviewed after the Financial Aid Office has received the results of your 2010-2011 FAFSA and you have completed the verification process. In order for all unusual circumstance requests to be processed; you must complete and return a 2010-2011 Verification Worksheet; along with a signed copy of your 2009 federal tax return and W-2's. The Verification Worksheet is available for download at www.letu.edu/finaid.

If additional supporting documentation is needed, the Financial Aid office will contact you at the email address below.

Student's Name _____ Student's ID No. _____

Student's E-mail _____ Parent's E-mail _____

Please check the circumstance which best applies to your situation:

Circumstance	Documentation Required
<input type="checkbox"/> Loss or reduction in employment wages	Paycheck Stubs, Letter from Employer , Unemployment statement
<input type="checkbox"/> Loss of Social Security, Child Support, Workers compensation, or other	SSA1099, Signed Statement, Statement from the Work Force Commission, Signed Statement from your lawyer
<input type="checkbox"/> Divorce or Separation	Divorce Decree or Separation Documentation
<input type="checkbox"/> Death of Father/Mother/Spouse	Death Certificate
<input type="checkbox"/> Excessive Medical Expenses already paid not covered by insurance. (Expenses that are owed cannot be counted.)	Medical Receipts, Check Numbers and amounts.
<input type="checkbox"/> Elementary/Secondary Private School Tuition	Statement of Account from the Private School
<input type="checkbox"/> Transfer of Funds from an IRA to the Roth IRA	Statement from your Tax Accountant, CPA, or Financial planner
<input type="checkbox"/> Other:	Written Documentation of Proof

In the space below, please print a brief explanation of your unusual circumstances (attach an additional page if necessary). Supporting documentation should be attached.

The following 2010 Income information must be included in order for your request to be processed.

Estimated adjusted gross income in 2010	Parent	\$	Student	\$	Spouse	\$
Estimated untaxed income/benefits in 2010	Parent	\$	Student	\$	Spouse	\$
Estimated income earned from work in 2010	Mother	\$	Student	\$	Spouse	\$
	Father	\$				

Dependent students, give parent and student information. Independent students, give student (and spouse) information.

Signature of Student _____ Date _____

Signature of Parent _____ Date _____

Attach the requested documentation, the completed Verification Worksheet, and return this form to the office of Financial Aid. This information may be faxed to 903.233.4302.