

Internal use ONLY

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2023-2024 Special **Circumstances Request** Parent in College

				ratetit ili College	
Student Name			ID#	ID#	
Please complete form in blue or black	k ink. Incomplete	forms will not be	e accepted		
Ithough the FAFSA doesn't allow including a pand attending college at least half time, LSSU proof of your parent(s) college attendance – substitutions. The parent must be enrolled in a gederal Title IV funds.	may be able to make	e an adjustment to yo on bill that shows enr	our FAFSA on ollment and c	your behalf. You must submit harges paid by the parent–for	
ECTION I - PARENT INFORMATION					
ame of Parent Attending College:					
ay Phone:					
s Parent's tuition paid or reimbursed by Emplo	yer? No	Yes			
Yes, how much?					
lame of university, college, or other accredited	d school:				
	Associate degree	Bachelors	Masters	Doctorate	
Fall 2023 Spring 2024 State Company Spring 2024 Spring 2	GU. Please make su the parent's name. I rent's household (at least half-time (n	re the proof of enrolling commentation is not including student). Similar including student including of 6 semesters.	ment includes required for p Also write the er or quarter h	the number of credit hours by parent enrollment at LSSU. e name of the college for any nours per term) between July 2	
Full Name	Age	Relationship	C	College or University	
		Self		LSSU	
ECTION IV— CERTIFICATION By signing this form, I certify that all of the	above information	is complete and co	rrect.		
Student Date			R	ETURN FORM TO:	
Parent (one parent must sign) D				ake Superior State Universid Office	

WARNING: If you purposely give false or

misleading information on this worksheet, you may be fined, be

sentenced to jail, or both.

Financial

650 West Easterday Avenue Sault Ste. Marie, MI 49783-1699

Phone: 906-635-2678 Fax: 906-635-6669 Email: finaid@lssu.edu