



WESTMONT

2017-2018 Special Circumstances Request

STUDENT INFORMATION

Last Name First Name M.I.

Westmont ID Number or Last 4 digits of Social Security Number

E-mail Address

Student's Cell Phone

REQUIRED DOCUMENTATION

All appeals **must** include the following:

- A signed letter explaining your Special Circumstance
- 2017-18 Verification Worksheet
- 2015 Parent and Student Tax Return Transcripts
- 2015 W-2 Forms(s)

Please select the option below that best fits your circumstance and include all of the documentation listed, in addition to the documents listed above.

LOSS OF EMPLOYMENT OR REDUCTION IN EMPLOYMENT/INCOME

- Signed copy of the 2016 Tax Return
- 2017 Projected Income. Please include estimates of all income, including: income earned from work, interest income, rental income, unemployment or retirement income, account distributions, etc.
- Copy of documentation relevant to your reduction in income, lay off, or unemployment.

MEDICAL EXPENSES PAID IN 2016

- Itemized list of "out of pocket," medical expenses incurred in 2016. Please do not include insurance premiums.

ONE-TIME INCOME RECEIVED IN 2015

- Please indicate the nature of the income that you do not expect to receive again. Also attach any relevant documentation.

SIGNATURE

By signing this worksheet, we certify that all the information is complete and correct:

Student

Date

Parent

Date

Submit this completed form to:

Westmont College
 Office of Financial Aid
 955 La Paz Road
 Santa Barbara, CA 93108
 Fax: 805-565-7157
 Email: finaid@westmont.edu