

Notes:

## 2024 - 2025 Educational Expense Form

Complete this form to report tuition payments of at least \$2000 made for the 2024-2025 academic year (July 2024 – June 2025). Report only if payments are made by the parent(s) providing information on the applicant's FAFSA. 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: (\_\_\_\_\_\_ - \_\_\_\_ Parent's E-Mail: \_\_\_\_\_ > Step 1. Report the NET COST paid for the student's <u>siblings'</u> education (grade school, middle school, high school, college). FIRST: What Can You Include? • Net Cost paid for the 2024-2025 academic year, between July 2024 and June 2025 • For K-12 years: tuition and mandatory fees, minus all scholarships, grants and tuition reductions • For college years: tuition, fees and books, plus housing and meals (if applicable), minus all scholarships and grants SECOND: Details Name: \_\_\_\_\_ Age: \_\_\_\_ School: \_\_\_\_\_ Your Net Cost: \$\_\_\_\_\_ > THIRD: Provide Documentation Attach proof of the costs and/or amount owed <u>for each student</u>, such as the most recent billing statement or financial aid letter. > Step 2. Report the NET COST paid for a parent's education. > FIRST: What Can You Include? • The cost of tuition, fees and books, minus all scholarships, grants and employer reimbursement. ➤ SECOND: **Details** Which Parent: □ Father □ Mother Degree Expected: ☐ Undergraduate ☐ Graduate School: \_\_\_\_\_\_ Program: \_\_\_\_\_\_ Attendance Dates: \_\_\_/\_\_ to \_\_/\_\_ Program Completion Date: \_\_\_/\_\_ Your Net Cost: \$\_\_\_\_\_ 

\* 2024-2025 academic year \* > THIRD: Provide Documentation Attach proof of the costs and/or amount owed <u>for each student</u>, such as the most recent billing statement or financial aid letter. Step 3. Signatures Certification: 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 cannot accept a typed signature If possible, please return as a .pdf by email along with any applicable supporting documents. It may also be faxed or mailed. Office of Financial Aid ◆ 555 North Sheridan Road ◆ Lake Forest Illinois 60045-2338 lakeforest.edu/finaid ◆ finaid@lakeforest.edu ◆ Phone & Fax: 847-735-5103 Office Use Scanned □ Data Entry Done □ Doc'n Complete: □Yes □No If "no" family notified? \_\_\_/\_\_ NEW RETG Orig EFC: \_\_\_\_\_\_ Adj EFC: \_\_\_\_\_ Total Part 1: \$\_\_\_\_\_ Total Part 2: \$\_\_\_\_\_ Initials/Date: \_\_\_\_\_