

2018-19 Change-in-Circumstances—Elementary/Secondary Tuition

Student Name: _____ **Student ID/SSN:** _____

We were recently informed that your family is incurring tuition expenses not accounted for on the *Free Application for Federal Student Aid* (FAFSA). To determine if any adjustments can be made to your financial aid file, please complete all information below and submit the requested documentation.

☐ **Private School Tuition:** Your family is currently paying tuition for a student enrolled in a private elementary or secondary school (other family members in college cannot be considered as they are accounted for on the FAFSA).

Documentation Requirements: Statements from school(s) of actual tuition paid or to be paid for the 2018-19 academic year. Please arrange to have the school's business office complete the form on the following page and return it to our office.

Please list names of all students below and institution student is attending. **Once we receive all forms back from all schools we will process this appeal.**

STUDENT _____ INSTITUTION _____

STUDENT _____ INSTITUTION _____

STUDENT _____ INSTITUTION _____

I declare that the information reported on this form is true, correct, and complete. I agree to provide, if requested, any other official documentation necessary to verify information reported.

Signature

Date

For Office Use Only:

Elementary/Secondary tuition for 2018-19 _____
FAFSA Adjustment (cap at \$11,011)

Notes: _____

Counselor: _____ Date: _____

2018-19 VERIFICATION OF ELEMENTARY/SECONDARY TUITION BY SCHOOL BUSINESS OFFICE

North Central Student's Name _____ ID: _____

Please read and sign the statement and list your elementary/secondary student(s) below. Send a copy of this form to the Business Office of each school that your student(s) attend. **A separate form is required for each school.**

RELEASE AUTHORIZATION

I hereby authorize the Business Office of the school below to complete this document and forward it to the **Office of Financial Aid** either by mail to **30 North Brainard Street, Naperville, IL 60540**; by **FAX at 630-637-5608**; or by email at **finaid@noctrl.edu**.

The following student(s) attend your institution.

Name of Student

1) _____

2) _____

I certify that the above student(s) is enrolled at _____ during the academic year of 2018-19.

Signature

Date

SCHOOL BUSINESS OFFICE SECTION:

For each elementary/secondary student listed above that attends your institution, please list below the amount of tuition paid or to be paid during the academic year of 2018-19. **Do not include any fees paid towards room and board, athletic expenses, laboratory expenses, health care expense, or any expense other than tuition.**

Name of Student

Tuition costs for 2018-19

1) _____

2) _____

School Name and Address: _____

I certify that the information provided is true and correct.

Printed Name of School Official

Signature of School Official

Date