

SPECIAL CIRCUMSTANCES DEPENDENT



(Please print): ______ Student's Identification (ID) Number_____

Tuition Expense for Family Members:

List tuition expenses your family paid during 2024 or 2025. Do not include tuition paid for the applicant or college tuition forother members of the family. Exclude room, board, books and supplies.

Attach Receipts

Enter amount paid January - December 2024-2025 (tuition only)								
Name	Age	Relationship	Daycare	Preschool	Elementary	Academy/ High School		

Excessive Medical Expenses : (Only if these expenses were not claimed on your 2022 tax return.)

Complete this section only if actual 2022 <u>paid</u> medical bills and health insurance premiums exceed 11% of your adjusted gross income.

Adjusted Gross Income (AGI)	\$							
AGI x 11%	_ \$							
Medical Expenses	_ \$							
Amount that exceeds 11%	\$							
Attach Receipts								
Taxed Educational Benefits:								
Amount of taxed educational bene	fits include	d in your 2022 A	4GI \$					
Provide Documentation								
Student Signature		Parent Sigr	Parent Signature					
				,				
Date		Date						
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