

Print Student Name: _____

Student ID Number: _____

Step 4 – Household Information:

	<u>Name</u>	<u>Relationship to Student</u>	<u>Age</u>
1.	_____	_____	_____
2.	_____	_____	_____
3.	_____	_____	_____
4.	_____	_____	_____
5.	_____	_____	_____
6.	_____	_____	_____

Step 5 — Read, Sign, and Return to the John A. Logan College Financial Aid Office

Certification: All of the above information on this form and the attached documentation is true and complete to the best of my knowledge. If asked by the financial aid office, I agree to provide additional supporting documentation of the information I have given on this form. The special circumstance will not be reviewed if I do not provide the additional documentation.

Student signature _____

Date completed _____

Is your required documentation attached? Yes No

For Office Use Only

Prior year Special Circumstance: Yes _____ No _____

Special Circumstance Approved Special Circumstance Denied

Approved Denied Date _____

Staff Signature _____