

**STUDENT FINANCIAL ASSISTANCE**

6525 North Sheridan Road  
Sullivan Center Room 190  
Chicago, Illinois 60626  
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Scan completed form and E-mail to [finaidforms@luc.edu](mailto:finaidforms@luc.edu)



*Preparing people to lead extraordinary lives*

**2009-2010 Special Circumstance Appeal  
Loyola Guarantee Application**

**Student Name:** \_\_\_\_\_  
(Please print)

**Loyola ID:** \_\_\_\_\_  
(11 digits starting with 0000)

This form will allow you to request special consideration of your unique financial circumstances for 2009–2010.

*The Loyola Guarantee* assures that every student will have the opportunity to complete a Loyola degree. Therefore, if a family experiences a significant income loss that causes a substantial change in financial status, Loyola will work with students and their families to ensure they may be able to continue their studies at Loyola.

- Start by answering questions 1-3 below.
- Next, complete the relevant sections of the appeal form as fully as possible. Attach additional sheets, if needed, to fully explain your situation.
- Attach all relevant documentation of the situation (for example, loss of job appeals usually must include unemployment benefits statements and final pay stub from employer).

**Copies of your 2008 federal income tax returns for both parent and student must be attached. Tax returns must be signed, with all schedules and W-2 Forms attached (if they have not been previously requested and submitted for this academic year). Appeals submitted without tax documents will not be processed.**

- Finally, submit all documents: by mail, fax, or scan and email. Addresses listed above.

1. My parent applied for a Federal PLUS Loan for this academic year.      Y      N      N/A

    If yes, was the Federal PLUS Loan approved?      Y      N      N/A

2. I applied for a credit-based alternative loan academic year.      Y      N

    If yes, was the loan approved?      Y      N

3. Indicate below which financial circumstances are impacting your family.

*Private School Tuition*

*Decrease in Income/Loss of Job*

*Medical/Dental Expenses*

*Parents' Enrollment in College*

*Other Special Circumstances*—Please fully explain the financial circumstance. Attach additional sheets, if needed, and include appropriate documentation. We cannot adjust for mortgage or car expenses, bankruptcy, credit card debt, leisure activities or other students in college.

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**Certification Statement:**

All of the information provided by me or any other person on this form is accurate and complete to the best of my knowledge. If requested, we agree to give proof of the information we have provided on this form. Proof may include court documents, canceled checks, etc. Failure to provide the requested information will result in denial of the appeal.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Mother/Stepmother's Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Father/Stepfather's Signature

\_\_\_\_\_  
Date



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