

**SPECIAL CONSIDERATION
UNUSUALLY HIGH MEDICAL/DENTAL EXPENSES**
For Academic Year 2022-2023

Name: _____

Student ID#: _____

If you and/or your parents (dependent students only) **paid** excessive medical expenses not covered by insurance in 2020, please submit the following:

1. A signed copy of the 2020 itemized deductions or receipts verifying Medical Expenses **PAID**.
2. A signed copy of your and your parent's (dependent students only) 2020 Federal Tax Return.

You have experienced a change in the current economic condition of your household that is not accurately reflected on your financial aid application. You understand that you must thoroughly explain your request for reconsideration and will submit all supporting documentation requested by the Financial Aid Office.

Another type of special circumstance that may affect your eligibility for aid includes participation in a study abroad program or taking an unusually heavy credit load at DU. If you encounter either of these situations, you may qualify for an increase in your student budget (Cost of Attendance) based upon the program costs and you should also complete a special consideration form. We will *not* adjust a student's budget for any reason other than Davenport-related expenses.

Student's Hand-Signature

Date

Student Email Address

Phone Number

Please explain your special circumstance to have the Financial Aid Office at Davenport University re-evaluate your financial aid status.
