

Name \_\_\_\_\_  
ID \_\_\_\_\_  
**2019-20 Parent(s) in College.online (738)**

**Western Illinois University**  
Financial Aid Office  
Sherman Hall 127  
1 University Circle  
Macomb, IL 61455-1390  
Phone: 309/298-2446  
FAX: 309/298-2353

I am requesting a special review of my 2019-20 financial aid application to include a parent in college. If both parents listed on the FAFSA are attending college, please complete a separate form for each parent.

My parent is enrolled for at least six credit hours for at least one term/semester or twelve clock hours per week during 2019-20. I have provided the following documentation:

1. Print name and address of parent attending college:

Parent name \_\_\_\_\_  
Street address \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip code \_\_\_\_\_

2. My parent is enrolled in a program leading to a degree or certificate.  Yes  No  
Parent's anticipated date of graduation is \_\_\_\_\_ Month \_\_\_\_\_ Year

Name and address of parent's college, university or technical school:  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

College, university or technical school federal school code:

3. **I have attached a copy of my parent's class schedule for at least one term/semester between July 1, 2019 and June 30, 2020.**  
4. **I have attached a statement from the college showing the tuition/fees my parent paid between July 1, 2019 and June 30, 2020.**

My parent  is/  not being reimbursed by their employer for tuition and fees.  
Check one  
Amount of reimbursement \$ \_\_\_\_\_

My parent  is/  not receiving federal financial aid for the 2019-20 academic year.  
Check one  
Total amount of gift aid \$ \_\_\_\_\_

Signature of parent(s) attending college \_\_\_\_\_ Date \_\_\_\_\_

Student's signature \_\_\_\_\_ Date \_\_\_\_\_