

Financial Aid Office

711 E Boldt Way Appleton, WI 54911

Phone: (920) 832-6583 | Fax: (920) 832-6582

financial.aid@lawrence.edu

2026-2027 SPECIAL CIRCUMSTANCE REQUEST FORM

| STUDENT NAME | LAWRENCE ID C | R D.O.B. | | |
|---|---|--------------|--|--|
| This form should be completed when a family can document a significant change in financial circumstances, or if you believe there are special circumstances that were not included/considered on your initial aid application. Please provide an explanation for your request below: | | | | |
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| Carefully read the following before sign | ing this form. | | | |
| Reconsideration of Aid: I/We understand that submission/review of this form does not guarantee a change in the student's financial aid eligibility. I/We understand that any additional Lawrence University Grant will only be offered if the student accepts all Federal Direct Student Loans offered to them. I/We understand that future financial aid eligibility will be based on an annual review of financial aid application materials. | | | | |
| I/We affirm that the information provided in my appeal and the knowledge. I/We understand that false statements or misrepre of financial aid. I/We understand that appropriate adjustments n submitted. | sentations may be cause for denial, reduction, withdrawal | or repayment | | |
| Please reach out to our office if you are not able to provide a handwritten signature. We will provide details on an alternative way to sign this form. | | | | |
| STUDENT SIGNATURE | DATE | | | |
| PARENT SIGNATURE | DATE | | | |

Return completed form to the Lawrence University Financial Aid Office.

| Secure Upload | Email | Fax | Mail |
|-----------------------|----------------------------|----------------|--|
| lawrence.leapfile.net | financial.aid@lawrence.edu | (920) 832-6582 | Financial Aid Office Lawrence University 711 E Boldt Way Appleton, WI 54911 |