KANSAS STATE UNIVERSITY

2016-2017 Medical Expense Form

Please complete and submit this form to:

Office of Student Financial Assistance
104 Fairchild Hall | 1601 Vattier Street
Manhattan, KS 66506-1104
Office 785-532-6420 | Toll free 877-817-2287 | Fax 785-532-7628
Website ksu.edu/sfa | Email finaid@ksu.edu

Student's Name (Last, First, MI) _____

Wildcat Identification Number _____

Student's K-State Email Address _____

Student's Phone Number _____

Medical expenses that were paid personally by you or your parent(s)/spouse in 2015 can be considered through the use of the Professional Judgment Appeal. Typically, the amount of medical expenses paid is unusually high and has created a financial burden for the family. **Note**: The Free Application for Federal Student Aid (FAFSA) protects a percentage of the student's and/or parent's income for medical expenses when determining the student's federal financial aid eligibility. For consideration, the student and parent(s)/spouse medical expenses paid must exceed the value already protected.

Submit this form if you did not include medical expenses in your itemized federal deductions. Otherwise, if you included medical expenses in your itemized deductions, please submit Schedule A from your 2015 federal tax return.

Dependent students - report medical expenses paid by the parent(s) whose income is reported on the FAFSA.
Independent students - report medical expenses paid by you and/or your spouse.

Medical Expenses Paid in 2015				
Name of Medical Provider	**Type of Medical Expense** (surgery, doctor visit, pharmacy, etc.)	**Billed Amount Not Covered by Insurance**	**Amount Paid in 2015**	**Date Paid**

If additional space is needed, you may submit a second page of this form.

Certification Statement

The amount of medical expenses paid by myself or my parent(s)/spouse is true and accurate to the best of my knowledge.

Signature of Student (required) _____ Date _____
Digital signatures are not accepted.

Signature of Parent on FAFSA (required) _____ Date _____
Digital signatures are not accepted.