

2017-2018 PARENT CONTRIBUTION REVIEW FORM

@mymail.mines.edu

STUDENT NAME (PRINT CLEARLY)

CWID NUMBER

EMAIL ADDRESS

PARENT NAME

PARENT PHONE AND EMAIL ADDRESS

Deadline: March 1, 2018

Medical/Dental expenses paid between *January 1-December 31, 2017*. Do not include expenses covered by insurance or insurance premiums. Total paid must exceed \$3,000.00. **Submit:**

- Parent and student 2015 IRS tax return transcript. If either did not file, please complete the appropriate Non-Filer form and submit with 2015 W-2s.
- Household Member form listing members of your household as of today.
- Complete the table below; you may attach a spreadsheet if you need additional space.
- Attach paid receipts documenting the medical/dental expenses that you paid in 2017 and were not covered by insurance. Do not include insurance premiums or unpaid bills.

Natural disaster expenses paid between *January 1-December 31, 2017*. Do not include expenses covered by insurance or other agencies. **Submit:**

- Parent and student 2015 IRS tax return transcript. If either did not file, please complete the appropriate Non-Filer form and submit with 2015 W-2s.
- Household Member form listing members of your household as of today.
- Complete the table below; you may attach a spreadsheet if you need additional space
- Explanation of the natural disaster (i.e. flood, earthquake, etc.)
- Copy of insurance appraisal and police report (if filed)
- Proof of expenses *paid* for repairs in 2017 and not reimbursed by insurance

The Financial Aid Office must verify the original 2015 tax information before updating your FAFSA to your 2017 information. All documentation must be provided before your review request will be processed. If you have other extenuating circumstances we should consider, please contact our office for additional information.

Receipt Number	Provider Name	Total Expenses	Amount Covered by Insurance	Amount Paid in 2017
1				
2				
3				

I certify that the information provided is true and that false or misleading information will be cause for repayment of financial aid funds received. Due to limited funding, approval of a Contribution Review does not guarantee that additional funds will be awarded.

PARENT SIGNATURE

DATE

Return this form and required documentation to the Mines Financial Aid Office

finaid@mines.edu

Ben Parker Student Center, Golden, CO 80401

Phone: (303) 273-3301 or 888-446-9489 • Fax (303) 384-2252