



Student Financial Assistance Office

GI Parker Hall, 300 W. 13th Street

Rolla, MO 65409

Phone 573/341-4282 or 800/522-0938

Fax 573/341-4274 Email: sfa@mst.edu

2018-2019 Verification of Payment of Elementary and Secondary Tuition

Students submitting this form must also submit a Special Circumstance Form - available at <http://sfa.mst.edu/forms/>

- **Special Circumstance for Dependent Students V1** –if parent information was required on your 2018-2019 FAFSA
- **Special Circumstance for Independent Student V1**- if parent information was not required on your 2018-2019 FAFSA

Student Name _____

Missouri S&T Student ID# _____

Section A: To be completed by Missouri S&T student/parent

Name and date of birth of student attending Elementary or Secondary School

I give permission to _____
Name of Elementary or Secondary School

to provide the information requested below to the Missouri S&T Student Financial Assistance Office regarding my listed dependent. I acknowledge that **\$5,000** per sibling/child, per year is the *maximum* that Student Financial Assistance is able to consider.

Signature of Parent

Date

Section B: To be completed by elementary or secondary school official

Name of Elementary or Secondary School _____

Student presently enrolled? Yes _____ No _____

Anticipated period of enrollment: _____

Amount of tuition parent(s) paid or will pay for the 2018-19 academic year less any waiver, discount or financial aid. (Please do not include tuition paid for student attending Missouri S&T) \$ _____

I certify that all of the above information is accurate to the best of my knowledge as of this date.

Name of verifying official

Title of verifying official

Signature

Telephone number