

## 2025-2026

St. Mary's University Office of Financial Assistance One Camino Santa Maria San Antonio, TX 78228 Phone: (210) 436-3141

## Law and Graduate **Special Circumstances Form**

The Law and Grad Special Circumstances Form is for students who have additional educational-related expenses during the academic year that are not taken into account in the Cost of Attendance (COA). If approved, there will be an increase to your COA, which allows for additional Graduate PLUS or alternative loans. For details on your COA:

- Graduate Students go to https://www.stmarytx.edu/admission/financial-aid/cost/
- Law students go to https://law.stmarytx.edu/admission/financial-aid/

Complete this form indicating your circumstances, and submit with required documentation. Review will take place

Last Name	Fi	rst Name	<del></del>	M.I.	Student ID #
Term for the Request:	Fall/S	pring 🗖	Fall Spri	ing Summer (	<b>ס</b>
B. Reason for Request					
Childcare Expenses					
			nildcare provider. It m 2025-2026 academic y		of care, name of each
Name of C	hild	Age	Start of Childcare	End of Childcare	Total Cost Based on Part A—Term
Purchase of Compute	er/Laptop				
This is a one-time	budget in		If you previously request will not be approve		se for the purchase of a
This is a one-time computer/laptop, a	budget in an additior	nal reque		d.	se for the purchase of a
This is a one-time computer/laptop, a	budget in an addition ary's from o	nal reque	est will not be approve he Bexar County Area	d.	se for the purchase of a howing valid address.
This is a one-time computer/laptop, a	budget in an addition ary's from o	nal reque	est will not be approve he Bexar County Area	d.	·
This is a one-time computer/laptop, a  Commuting to St. Ma  Provide copies of  Bar Review Course  Provide copy of pa	budget indan additionary's from or residentia	outside t I lease a	est will not be approve he Bexar County Area agreement, utility bills,	d.  and documentation s  nd paid. We cannot c	howing valid address.  onsider unpaid portion of

Use the space below to detail the circumstance academic year. Examples include housing costs expenses, etc. In the table, provide the costs the	s exceeding your COA housing,	medical expenses, dental
NOTE: The monthly amount of he Documentation showing amounts paid duri	· ·	
	Housing-	
Expense (medical, dental, housing, etc)	Monthly Costs exceeding the COA Monthly Amount of \$1,388	Total of Other Costs Not Including in COA
Loan Request		
Indicate the amount you want us to increase you amount based on the budget increase, indicate "ramount of the additional requested amount.		
Graduate PLUS Loan\$	_	
Alternative Loan\$		

Student ID #\_\_\_\_\_

Student's ID Number

Date

You may submit your form and documents by fax or mail (on first page of worksheet) or use the "Submit Documents" option at <a href="https://www.stmarytx.edu/admission/financial-aid/forms/">https://www.stmarytx.edu/admission/financial-aid/forms/</a> to upload documentation.

Print Student's Name

Student's Signature

Office Use Only

RRAAREQ: LSCF

BDM: Law Special Conditions