

2020-2021 Budget Appeal

A. Student Information

_____	_____	_____	_____
Last Name	First Name	M.I.	Student ID # (DO NOT INCLUDE SSN)
_____			_____
Home Phone Number (include area code)			Date of Birth

B. Student Expenses

Your financial aid eligibility is based on a standard budget. We may be able to adjust your budget—and your financial aid eligibility—if you have allowable expenses that you are incurring during the academic year that are higher than your standard financial aid budget.

Enter the expenses you wish to be added to your cost of attendance. Expenses must be incurred during the academic year (July 1 2020- July 31 2021). **Documentation is required for all of the expenses you list below.**

- | | | |
|-----------------------------|----------|----------------|
| 1) Off-Campus Rent/Mortgage | \$ _____ | /Month |
| a. Utilities | \$ _____ | /Month |
| 2) Transportation | \$ _____ | /Month |
| 3) Computer Purchase | \$ _____ | /One Purchase |
| 4) Medical/Dental Expenses | \$ _____ | /Academic Year |
| 5) Child Care Expenses | \$ _____ | /Month |
| 6) Special Books/Supplies | \$ _____ | /Month |
| 7) _____ | \$ _____ | /Month |

Required: Attach a signed statement describing your reason(s) for requesting that we adjust your 2020-2021 budget.

C. Certification and Signature

I understand that this information will be reviewed and I may be asked to provide additional documentation or clarification pertaining to my situation stated above. By signing this form I certify under penalty of perjury, that all the information reported to qualify for federal student assistance is complete and accurate. If I give false or misleading information on this worksheet, I may be fined, be sentenced to jail, or both.

_____	_____
Student's Signature	Date
_____	_____
Parent's Signature (Dependent Student)	Date