BUDGET ADJUSTMENT REQUEST 2014-2015

Student Name: ____________________________  Banner ID: ____________________________

Directions:
1) PART A: Read through each category of your financial aid budget in the table below carefully.
2) PART B: Check each area you are requesting a budget adjustment for.
3) PART C: Provide the appropriate information and documentation.
4) PART D: Indicate the increase amount, and the fund type from which you would like your financial aid to be increased by.
5) PART E: Sign certifying your request for this budget adjustment.
6) All requests must be documented. You only need to provide information and documentation for items that exceed your current financial aid budget amount. Failure to provide proper documentation will result in this form being returned to you for completion.

PART A: Review your current financial aid budget.
Read through each item in your current financial aid budget below. You can request an adjustment only for the item(s) which you are spending more than your current budgeted amount. A Financial Aid Advisor will review your request and make any necessary adjustments. An increase in your budget and/or financial aid is not guaranteed.

<table>
<thead>
<tr>
<th>BUDGET ITEM CATEGORY</th>
<th>REQUIRED DOCUMENTATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Computer Expense: Up to $750</td>
<td>Attach a copy of the invoice or cost of the computer.</td>
</tr>
<tr>
<td>Books &amp; Supplies: $550 per semester</td>
<td>Attach proof of cost, such as receipts from the college bookstore or websites.</td>
</tr>
<tr>
<td>Room Rent Expense: $3,400 per semester</td>
<td>Attach copy of lease, rent receipt, or utility bills.</td>
</tr>
<tr>
<td>Board Meal Expense: $2,086 per semester</td>
<td>Attach proof of cost, such as receipts from the grocery stores.</td>
</tr>
<tr>
<td>Transportation Expense: $312 per semester</td>
<td>You may provide the weekly cost of gas if you live more than 5 miles from campus, receipts for car repairs and maintenance, and emergency trips home.</td>
</tr>
<tr>
<td>Personal Expense: $790 per semester</td>
<td>Must provide proof of costs and that any non-cosmetic medical, dental, and eye care expenses were not covered by insurance.</td>
</tr>
<tr>
<td>Childcare Expense: not automatically budgeted</td>
<td>Day care costs of dependent children.</td>
</tr>
<tr>
<td>Other Educational Expenses: not automatically budgeted</td>
<td>Attach proof with explanation of amounts.</td>
</tr>
</tbody>
</table>
PART B: Request for Budget Adjustment

I am requesting the following adjustments to my financial aid budget. Be sure to check all that you want to be considered with this request.

1) Semester(s) Requesting Adjustment for: (check all that apply)  o Fall  o Spring  o Summer

2) Category Requesting Adjustment(s) for:
   o Books & Supplies  o Room  o Transportation  o Childcare
   o Computer  o Board  o Personal  o Other: _______________

*Charges already on file with the Student Accounts Office for fees will automatically be reviewed.*

PART C: Information and Documentation

Write the name of each category you are requesting an adjustment for and provide the required information for each. You must indicate the dollar amounts (weekly/monthly) in each request and provide all supporting documentation.

Category 1: __________________________
Reason for request 1:

____________________________________
____________________________________
____________________________________

Category 2: __________________________
Reason for request 2:

____________________________________
____________________________________
____________________________________

Category 3: __________________________
Reason for request 3:

____________________________________
____________________________________
____________________________________

*Attach additional sheets if necessary.*

PART D: Request for Additional Financial Aid

Increase my financial aid awards by this amount: $_____________ from this type of funds:
   o Subsidized Loan  o Unsubsidized Loan  o Alternative Loan  o Other: ____________

PART E: Certify Request

I have provided realistic estimates where actual costs have not yet been incurred. My signature certifies that the above expenses directly relate to my educational needs. I understand that the approval of expenses is discretionary.

____________________________________  ______________________  ________________
Student's Signature  Local Phone Number  Date