



Cost of Attendance Increase Request

Name: _____ Email: _____ Phone: _____

The Cost of Attendance (COA) for a student is an estimate of the student’s educational expenses for the academic year in which the student is enrolled. It is produced within the federal guidelines and consists of estimated tuition and fees, books and supplies, living expenses, transportation and misc. personal expenses. Additional items may be considered in adjusting the COA that may not have been included in the standard COA determination. If you have any extra ordinary expenses shown below, you can submit the cost of attendance increase request form to the financial aid department to review.

Computer Purchase – May only be used one time for the entire program with a maximum of \$2500. Documentation includes: copy of a paid receipt or invoice/statement that **contains student’s name**, description of the product and is dated within the academic year.

Allowed: _____

Daycare Expenses – Only allowed for dependent child under age 12 and only considered for periods of time during which a student is engaged in school-related activities. Is limited to \$5000 for each child under 5 and \$2500 for each child 5-11 per academic year. Documentation includes: signed statement from provider with **cost for each named child** per week or month with the enrollment start and end date.

Allowed: _____

Travel Expenses – Only allowed for students Living more than 20 miles from campus. Capped at \$.625 per mile and only allowed for days student is on campus or in a school-related activity. Documentation includes: copy of Google or other map showing start and end addresses with number of miles included. The total determined cost will replace the existing transportation expenses already included in the COA .

Allowed: _____

Medical/Dental Expenses – May be considered if not reimbursable by your insurance provider or another source. Documentation includes: Copies of all paid receipts/statements which must include student name. The total amount of medical/dental expenses must be over the amount of the allowed in your income protection allowance (IPA) of your EFC calculation plus a portion of the misc personal expense in your cost of attendance budget. Contact the financial aid director to provide the amount. Each student’s IPA is specific to them.

Allowed: _____

The review of this form does not guarantee a change in your COA. If approved, the increase will allow you to borrow additional Grad PLUS loan funds and/or increase eligibility for an FWS award.

Total Allowed: _____

Certification: By signing this form, I certify all the information provided by me is true and correct.

Student Signature: _____ Date: _____

Return completed form and documentation to the SJCL Financial Aid Office