



2027-2028 Cost of Attendance (Budget) Increase Request

Student Name: _____

Student ID: _____

If you feel the amounts in your cost of attendance (COA) budget do not accurately reflect your current situation, you may be eligible to have your COA re-evaluated. COA adjustments may be considered for educationally related expenses, or for expenses that may directly impact the student's ability to continue their program of study. COA increases only result in additional eligibility for alternative/private loans or Parent PLUS loans. Submission of the form does not guarantee an increase in your COA.

Check the following reason for your request:

_____ **Computer Purchase** (maximum request \$2,000, one time in undergraduate years)

Include documentation: official receipt which indicates date of purchase and what was purchased, receipt must indicate the name of the person who made the purchase (may be hand-written if not on receipt)

_____ **Student Health Insurance**

Health insurance that students have purchased on their own (cannot be part of a family plan). Must provide a paid receipt for plan.

_____ **Other (must be an educationally related expense)**

Examples include: Dependent care expenses, student disability related expenses, additional educational supplies or equipment (in excess of amount allowed in COA), etc. Documentation showing amounts paid required.

Indicate the Term you are requesting the COA increase for:

☐ Summer 2027

☐ Fall 2027

☐ Spring 2028

By signing this form, I certify that all the information reported on this form is complete and correct.

Student Signature: _____

Date: _____

WARNING: If you purposely give false or misleading information on this worksheet, you may be fined, be sentenced to jail, or both.