

Cost of Attendance Professional Judgment Form 2013-2014



2013-14 BUDGET and/or CONTRIBUTION APPEAL FORM

Student Name Last	First	Middle	Student ID
Email		Phone Number	

Student's Name _____ Student ID number _____ Daytime Phone Number _____

The purpose of this form is to allow students to submit additional information regarding a change in their Cost of Attendance (COA) that has not been previously factored/considered. The college assigns each student a COA, also known as a Budget, which determines an estimated cost of their educational expenses for a given award period. The COA is comprised of the following components: Tuition/Fees, Room/Board, Books/Supplies, Transportation, Personal/Miscellaneous Fees and Average Loan Fees.

All applicants must complete the 2013-2014 Free Application for Federal Student Aid (FAFSA) at www.fafsa.gov before completing the Budget and/or Contribution Appeal Form. Adjustments made by the Financial Aid Office based on this appeal may or may not increase a student's eligibility for scholarships, grants, work-study, or student loans.

During the awarding process, the Financial Aid Office uses the equation: COA – EFC = Need. The EFC is Expected Family Contribution which is determined by the Federal Government when applying for financial assistance through the Free Application for Federal Student Aid (FAFSA). When packaging students their financial aid award (Federal Grants, Scholarships, Direct Loans, etc), it is a Federal requirement that we cannot exceed the student's COA.

Only on a case-by-case basis, the institution may re-evaluate a student's COA depending on exceptional circumstances. The evaluation will be based on out of pocket expenses paid during the enrollment/COA period which is checked below. If you believe your COA warrants re-evaluation resulting from one or more of the circumstance listed below, then complete and submit this form along with a written statement detailing your situation and supporting documentation to substantiate your circumstance. Please check all categories shown below that are applicable.

Complete the appropriate sections of this form to document your expenses, **attaching receipts for each item listed.**

We cannot process forms submitted without documentation.

Please check appropriate enrollment period(s): ☐ Fall 2013 ☐ Spring 2014 ☐ Summer 2014

☐ **ALL APPEALS:** Submit a signed letter of appeal specifically explaining the situation. **Letter of appeal should be specific** and address how the expenses are not discretionary and how they are impacting or will impact your ability to meet your standard cost of attendance.

☐ **STUDENT'S CHANGE IN HOUSING STATUS**

(attach signed letter of explanation and copy of lease/mortgage and utility bills to verify your share of expenses):

✓ Rent/mortgage \$_____ (student's share only, per month)
 ✓ Utilities (excluding phone & internet) \$_____ (student's share only, per month)
 ✓ Phone (land line) \$_____ (student's share only, per month)
 ✓ Phone (cellular) \$_____ (student's share only, per month)
 ✓ Internet \$_____ (student's share only, per month)
 ✓ Other _____ \$_____ (student's share only, per month)

☐ **DEPENDENT CARE EXPENSES** (attach a signed letter of explanation and statement or receipt from care provider):

✓ Care Provider's Name _____
 ✓ Names and Ages of Dependents _____
 ✓ Total Cost per month \$_____ for _____ months during the academic year.

☐ **TRANSPORTATION EXPENSES:** Attach a signed letter of explanation and receipts showing payment

✓ Major Car Repairs (routine maintenance cannot be considered): \$ _____

Additional Travel:

✓ Air Travel for Out-of-State Students (attach signed letter of explanation receipt showing cost of round trip ticket):

Home Town: _____ to Cheyenne \$ _____

☐ **EXPENSES RELATED TO A PHYSICAL OR LEARNING DISABILITY** (attach a signed letter of explanation and receipts documenting payment):

✓ Nature of the Disability _____

✓ Costs Not Covered by Insurance or Other Third Party Payer (VA, Voc Rehab, DVR, etc.): \$ _____

☐ **EXPENSES RELATED TO PURCHASE OF A COMPUTER** (attach a signed letter explaining how the purchase was/is a necessary educational expense and documentation showing equipment and cost):

✓ Date of Purchase: _____

✓ Equipment Purchased: _____

✓ Total Costs of Purchased Computer and Necessary Equipment: \$ _____

☐ **OTHER:** Attach a signed letter of explanation and receipts documenting payment:

Nature of Expense and brief explanation: _____

CERTIFICATION: I/we certify that all information provided on this form is true and accurate. I further understand that false statements or misrepresentations will be cause for denial, reduction, withdrawal and/or repayment of financial aid and may subject me to a fine or imprisonment, or both, under provisions of the United States Criminal Code.

Student's signature

Date

Daytime Phone #

Parent's Signature (required if providing parent data)

Parent's Printed Name

Date

For Office Use Only:

Approved: ☐ Yes ☐ No COA Adjustment _____

Reviewed by: _____ Date _____

Comments: _____