

STUDENT FINANCIAL ASSISTANCE

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Scan completed form and E-mail to finaidforms@luc.edu



Preparing people to lead extraordinary lives

2009–2010 BUDGET ADJUSTMENT APPEAL

Student Name: _____
 (Please Print)

Loyola ID: _____
 (Your 11-digit Loyola ID number begins 0000.)

The institutional budgets used by the Office of Student Financial Assistance for the Campus-Based Aid programs, Loyola Grants and the Federal Stafford Loan Program are developed using estimated average costs of attendance and compiled into budget amounts by semester or quarter, as applicable. This form allows students to request adjustments to the standard budget amounts by providing justification for the increase, as well as an itemization and documentation of actual expenses incurred. **This form must be completely filled out and appropriate documents submitted to initiate a review of your special circumstances. (Expenses: list only the amount of your expenses; do not list amounts that are a shared responsibility with a roommate.)**

	Monthly Expenses	Nine Month Academic Year Expense (Sept. 2009 – May 2010)
Room/Rent (Attach a copy of lease or rental agreement)	_____ x 9	_____
Board (food) (Attach receipts)	_____ x 9	_____
Utilities (gas/electric) (Attach copies of monthly bills)	_____ x 9	_____
Telephone (exclude long-distance charges) (Attach copies of monthly bills)	_____ x 9	_____
Clothing (required for educational program) (Attach copies of receipts and documentation of requirements for program)	_____ x 9	_____
Insurance (health/life/renters) (Attach copies of monthly bills)	_____ x 9	_____
Medical expenses not covered by insurance (Attach copies of insurance statements or medical bills)	_____ x 9	_____
Transportation (fuel)	_____ x 9	_____
Independent students ONLY: Private elementary or secondary school tuition for your children (Attach tuition statements for each child)	_____ x 9	_____
Other: _____ (Attach appropriate documentation for expense)	_____ x 9	_____



1B 2010



