

# INDIANA UNIVERSITY KOKOMO

Office of Scholarships & Financial Aid

## AY Budget Increase Request

**Purpose:** Budget adjustments exist in order to *possibly* change your need for financial aid. Review the choices below, check the box(es) that apply, provide the requested documentation and submit this form. Complete only those sections you have chosen.

Appeals must be submitted no later than 30 days prior to the end of the enrollment period for which you are seeking financial aid. Incomplete or late submission of this appeal may jeopardize your financial aid.

### Requirements:

- You must have submitted a FAFSA for the current academic year you are requesting.
- You will submit this completed form and all required documentation must be submitted no later than 30 days prior to the end of the enrollment period.
- You must provide all required documents; we are unable to seek or arrange your supporting documentation.

University ID \_\_\_\_\_

Student Name \_\_\_\_\_ Phone \_\_\_\_\_

Current Address \_\_\_\_\_ City/State/Zip \_\_\_\_\_

### CHOOSE THE REASON FOR YOUR BUDGET INCREASE REQUEST AND PROVIDE ANY REQUESTED ADDITIONAL INFORMATION:

	<b>HOUSING:</b> A current signed copy Rental Agreement, Lease Agreement or Mortgage Statement showing the apartment or home listed in the student's name with current dates, and monthly payments on Company Letterhead.
	<b>TRANSPORTATION:</b> IUK uses an existing formula which involves your total number of days you attend classes and the mileage you accrue from your home address to calculate this cost. If you would like your transportation budget reviewed for a possible increase, simply checkmark the box. No other information is needed.
	<b>BILLING COSTS:</b> In excess of Mandatory tuition and fees (example: Nursing costs, Hyper fees, etc): List the amount of the fees and you must attached an itemized copy of your Bursar Bill showing the charges. Total amount (s) \$ _____
	<b>BOOK COST:</b> In order to review a possible budget increase based upon the cost of books, a student <u>must show a minimum out of pocket cost of \$700.</u> The student must provide an itemized list of books purchased and the student's name must be on the receipt.

I give permission to the Office of Student Financial Assistance to verify any information that I provide on this form. I understand that this verification may include a request for my tax documents. I certify that all of the information provided on this form is correct to the best of my knowledge. I understand that if I purposely give false or misleading information on this form I am liable for cancellation or repayment of all or part of my financial aid.

Student Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Office Use Only: Verified by: \_\_\_\_\_ Date: \_\_\_\_\_ AY: \_\_\_\_\_