The Cost of Attendance Adjustment form is for students who have additional expenses during the enrollment period, such as childcare costs, laptop, software, and supplies. Cost of Attendance reviews will take place after you complete a 2023-2024 FAFSA, and after you receive an initial 2023-2024 award package. Please note: Cost of Attendance adjustments only increase your loan(s), if eligible. Additional grant funding will not be awarded.

Student Name | Student ID | Phone Number (include area code)

☐ Childcare Expenses

Please note; this is for childcare expenses only and does not apply to private elementary or secondary school tuition. Your budget increase is determined off the weekly rate you pay for childcare, during your actual period of enrollment, with a maximum increase up to $2,000 per semester (one child), $4,000 per semester (two children), $6,000 per semester (three children), or $8,000 per semester for four children or more.

**Required documentation:** Attach a letter from your childcare provider indicating the name(s) and age(s) of the children in childcare, as well as the weekly costs for each child on letterhead. UIW will then determine the amount to increase your budget by based on the date(s) you are enrolled.

☐ Additional Educational Expenses

Examples: laptop, required software, costs associated with PhD dissertation, publications, etc. Expenses must be incurred during the 2023-2024 academic year and exceed allowances in the current cost of attendance. The maximum increase in the student budget will be $1,650 for a laptop, and up to $1,500 for any additional education expense.

**Required documentation:** A detailed letter explaining the additional educational expenses along with dated receipts.

Decline Loan Increase (Optional)

Your loan(s) will be increased to the maximum allowed unless you indicate otherwise below.

☐ No, do not increase my loan(s) at this time.

Signature

I certify the information on this appeal to be complete and accurate, and that I have attached the required documentation. If any of the information changes, I understand I must promptly notify the UIW Office of Financial Assistance and that I may be responsible for repayment of financial aid received if I fail to do so.

______________________________  ________________________
Student Signature (required)     Date