

Budget Appeal Transportation Affidavit

Student Name: Phone: Phone: NAU Email: NAU Email:	A. Student Information						
B. Commuting Expenses Include a copy of an electronic map showing distance traveled. Distance driven (round trip) Frequency (days per week) Total miles per week (i.e. from home to school) C. Major Vehicle Repair Include copies of paid itemized receipts in the student's name. Expenses not considered: routine maintenance, car payments, and insurance. Date of Repair Detail of what was repaired Total paid \$ \$ \$ D. Agreement and Understanding By signing below, I acknowledged that I have read and understood all the information outlined in this form. All of the information I am providing is true and accurate.	Student Name:		7-digit NAU ID Number:				
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Student signature: Date:							
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