

2022-2023 Budget Appeal

A. Student Information	
Name:	NAU ID:
Phone:	NAU E-mail:

B. Processing Information

Please submit all appeal documents: this form, a personal statement and applicable affidavits through the secure upload: nau.edu/OSFAdoc-upload.

The Budget/Cost of Attendance (COA) consists of direct and indirect costs related to your education expenses, including tuition, fees, room and board, books and supplies, and transportation. **Only expenses incurred between August through May will be considered.**

Before submitting the appeal, be sure to verify your costs are above what is allotted. If you have incurred expenses above your assigned budget, your appeal will be considered. For your current Budget/COA budget in LOUIE homepage, select the Financial Aid tile then Financial Aid Summary on the left click Cost of Attendance. **Budget appeals are evaluated on a case-by-case basis and approvals are not guaranteed.**

- Typically, budget appeals result in an increase of loan eligibility. If offered a Federal PLUS or private/alternative loan, it is the student's and/or parent's responsibility to apply for and be approved for the loan.
- Please allow up to 25 business days for your appeal to be reviewed.
- The deadline for the fall 2022 appeal is November 15, 2022 and for a full academic year budget appeal is April 1, 2023. Summer has its own appeal form.
- Items that **will not** be considered for a budget appeal include, but not limited to:
 - Credit card debt
 - Car payments
 - Car insurance
 - Moving expenses
 - Routine car maintenance (oil changes, tires, air filters, batteries, etc.)
 - Cell phone purchase or bills
 - Health insurance (unless required for your program)
 - Grocery bills (food allowance is included in the budget)

C. Required Documentation

The following documentation is required for a budget appeal. Please initial each box indicating you are providing adequate documentation.

_____ This budget appeal form.

_____ A personal statement explaining your expenses, including how they pertain to your education and when they were incurred (section D below).

_____ Any applicable [affidavit forms](#).

_____ Applicable supporting documentation of your expenses, including paid receipts. **Paid receipts in your name and only paid expenses will be considered.**

D. Personal Statement Required

How do your additional expenses pertain to your education?:

When were these expenses incurred and paid? Include dates if you are requesting increases for program expenses, such as clinical rotations.

E. Appeal Circumstance(s) (Check all that apply.)

Computer Expense

- \$3,000 limit per college career (Graduate or Undergraduate)
This includes equipment & software: printer, mouse, keyboard, etc.
- Provide a itemized receipt that includes the date. ***The receipt must be in the student's name.***

Transportation Expenses – [Required Affidavit](#)

- **Major vehicle repair:** Provide an itemized list of all expenses incurred and copies of paid receipt(s) in the student's name (*e.g. new transmission, engine repair, etc.*)
- **Commuting:** An electronic map that includes directions of the route driven to and from school for educational purposes. Mileage will be considered at \$.445 per mile, the number of days per week, and the number of weeks during the semester that the commute is made.

Program Expenses – [Required Affidavit](#)

- Expenses required for the student's program (e.g. stethoscope, scrubs, travel for clinicals).
- A signed letter from a program professor, director, or anyone in the program that can support the need for the expense. If for travel, documentation for specific mileage is required (electronic map required).

Housing & Utilities Expenses – [Required Affidavit](#)

- Only rent or mortgage payments for the student's primary home will be considered.
- A signed copy of a current lease or mortgage statement verifying monthly housing expenses.
- A detailed billing statement that includes student's name, address, and amount paid/owed.

Dependent Care – [Required Affidavit](#)

- Provide a statement that includes:
 - Who the dependent is and their relation to the household.
 - The period(s) for which dependent care is required.
 - Documentation that outlines the costs associated.

E. Agreement and Understanding

By signing below, I acknowledge 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 signature: _____

Date: _____