**Budget Appeal
Affidavit – Education Abroad Expenses**

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| 1. **Student Information**
 |
| **Student Name:** |  | **7-digit NAU ID Number:** |  |
| **Phone:** |  | **NAU Email:** |  |
| **B. Education Abroad Program Information** |
| **Study Abroad Program Name** | **Location** | **Start Date** | **End Date** |
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| **C. Education Abroad Expenses – Not Charged Through NAU**An Education Abroad Program Cost Sheet must be signed by an Education Abroad Advisor and submitted with the appeal. |
| **Detailed Description of Study Abroad Expense** | **Amount Paid** |
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| **Total Education Abroad Expense** |  |
| **D. Agreement and Understanding** |
| By signing below, I acknowledge that I have read and understood all the information outlined in this form. I attest that all information that I am providing is true and accurate. I acknowledge that I understand that only expenses incurred by me, as the student, are considered for the appeal process. **Signature must be hand-written, typed or electronic signatures will not be accepted.** |
| **Typed – Student First and Last Name** |  |
| **Student Signature** |  |
| **Date** |  |