

**Cost of Attendance Appeal
 Affidavit – Personal Expenses**

| A. Student Information | | | |
|--|-------------------------------|-------------------------------|-----------------------|
| Student Name: | | 7-digit NAU ID Number: | |
| Phone: | | NAU Email: | |
| B. Personal Expenses | | | |
| Detailed Description of Personal Expense | Vendor / Business Name | Date Purchased | Expense Amount |
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| Total Personal Expenses | | | |
| D. Agreement and Understanding | | | |
| <p>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.</p> <p>Signature must be hand-written, typed or electronic signatures will not be accepted.</p> | | | |
| Typed – Student First and Last Name | | | |
| Student Signature | | | |
| Date | | | |