

Cost of Attendance Adjustment Request Form

The Federal government requires universities to set a standard Cost of Attendance (COA) for students. UMass Dartmouth uses the COA as a basis for awarding financial aid. Your COA includes: **direct educational expenses** (tuition, fees, on-campus housing/meals) and **indirect educational expenses** (off campus housing/meals, supplies, personal expenses, travel expenses). COA information is available at www.umassd.edu/financialaid/eligibility/

Complete this form if you would like to receive consideration for additional education related expenses not already included in the standard COA. Submission of this form **will not** result in additional need based grant or scholarship.

Increasing your COA may allow for additional loan borrowing through the following programs:

- Federal Direct Subsidized/Unsubsidized Loan (if not already awarded maximum amount)
- Federal Direct Parent Loan for Undergraduate Students (PLUS) or Graduate PLUS Loan
- Private Student Education Loans (application and approval required through the lender of your choice)

Student Information

Student ID Number	Last Name	First Name	M.I.
Street Address	City	State	Zip
Home Phone	Cell Phone		

Additional Expenses Requested	Amount Requested	Documentation Required
Books, course materials, supplies, and equipment	\$	Attach proof of receipt or invoice
Computer	\$	One-time purchase; cannot exceed \$2500. Attach proof of receipt or invoice
University Health Insurance (circle one)	Full Year Half Year	Must be enrolled in University insurance plan and be financially responsible for this cost
On-Campus Housing	\$	Attach a copy of the on-campus billing charges.
Off-Campus Housing	\$	Attach detailed summary of monthly expenses. Attach copies of lease/rental agreement, utility bills, etc.
Child Care	\$	Attach documentation including child's name, age, and monthly expenses. Include statement from daycare provider, cancelled checks, receipts, etc
Other Educational Expenses	\$	Attach detailed letter explaining your request. Attach copies of bills, receipts, and/or written estimates when applicable

By signing below, I certify that all of the information reported on this form is complete and correct. The Office of Financial Aid may request additional information. I understand that submission of this form does not guarantee approval.

Printed Name _____ Student Signature _____ Date _____

Return Completed Documents To: _____

Student Service Center
University of Massachusetts Dartmouth
285 Old Westport Road
Dartmouth, MA 02747