

Budget Increase Request Form: Academic Year: 2023-2024

Student Name _____ Widener ID _____

Most students find that our standard cost of attendance (COA) budgets will meet their needs to cover tuition, fees, and basic living expenses. With proper documentation, budget adjustments may be made to cover valid, educationally related expenses. Budget adjustments are NOT permitted for: car payments, revolving debt such as credit cards, security deposits and moving expenses. Requests for budget adjustments must be made in writing and will be considered for costs incurred during the academic year only. This form is designed to assist you in this request.

The total of all aid may not exceed your COA. Approved increases to the COA will only result in an increase in your eligibility for student loans and/or Federal work study.

Section I – Reason for Request: Please explain the reason for your request (below or attach a separate letter) and attach any supporting documentation. Page 2 is required to complete if you are requesting an increase to living expenses.

Please list the total amount you are requesting to cover educational related expenses for the academic year (August to May). \$ _____. Your documentation should support this amount.

Section II – Supporting Documentation:

_____ **Laptop Purchase** – Attach a copy of the receipt for your laptop purchase made after May 1, 2021 for the 2023-2024 academic year.

_____ **Rent/Utilities/Board** – Attach a copy of your lease, utility and board bills – in excess of \$1,512.00 per month for students living off-campus or in the dormitory (DE only). Students living at home with their parents must have an excess of \$540.00 per month.

- Page 2 of this form must be completed in FULL for living expense increases.

_____ **Transportation Expenses** – Transportation expenses do not include the cost of purchasing or leasing a car, but rather the cost of transportation to and from school. Currently, the COA allows \$393.00 per month for transportation expenses.

- Required documentation includes a print out from www.mapquest.com (or a similar site) showing a one-way trip from your current address to Delaware Law School.

_____ **Unusual, non-reimbursed, medical or dental expenses** – Attach a copy of all current medical or dental expenses being paid out of pocket. _____

Other - _____

Section III – Monthly Expenses: Please submit information relating to you, the student only. If you share monthly costs, please submit your portion of the costs.

Living Expenses:

	Monthly	9 Months
Housing (Rent or Mortgage)	\$	\$
Food	\$	\$
Utilities		
Electric/Gas/Oil/Water/Sewer	\$	\$
Telephone	\$	\$
Internet/Other	\$	\$
Transportation (gas, parking, etc.)	\$	\$
Medical and Dental Care not covered by insurance (attach documentation)	\$	\$
Personal (Clothing, personal care, etc.)	\$	\$
Other	\$	\$
Total Living Expenses:	\$	\$

Section IV – Monthly Resources: Please list any financial resources other than financial aid:

Earnings	\$	\$
Savings	\$	\$
Other Income (specify)	\$	\$
Total:	\$	\$

The costs of attendance (COA) in the Financial Aid Office are calculated for the Fall/Spring 9-month academic year. By signing below, you are certifying that the information submitted is true to the best of your knowledge and that all financial aid funds you receive will be used for educational expenses. You are also acknowledging that if you fail to submit adequate documentation to support this request, your request for a budget adjustment will not be processed.

Student Signature

Date

Approved _____ Denied _____ Comments _____

Director of Financial Aid

Date