

OFFICE OF FINANCIAL AID

2022-2023 COST OF ATTENDANCE ADJUSTMENT

2023 CFCOA

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to incur during the period of enrollment. These costs include and miscellaneous personal expenses and are referred to as t	
The Cost of Attendance (COA) will vary according to your enrout-of-state), number of weeks enrolled in the semester(s), and deposit actual expenses. The Office of Financial Aid can only conside education and <i>will not</i> make allowances for items already ac	endency status. Costs are calculated by using average versus er the <i>direct costs</i> associated with supporting the student's
Cost of Attendance Adjustments for the following, but not lii	mited to, will not be taken into consideration:
 Purchase of down-payment for a vehicle 	Cell phone
Clothing	Credit card payments
Gym membership	
Please note: Increasing your Cost of Attendance does not a	lways result in additional financial aid.
Section 1: INSTRUCTIONS	,
 Complete and submit the Cost of Attendance Adjus Submit a signed statement detailing the items for th Submit all required documentation based on circum Section 2: CIRCUMSTANCES	he Cost of Attendance in this request
ALLOWABLE PROGRAM EXPENSES – REQUIRED DOCUMENT	TATION:
Automotive:	EMT:
☐ Attach a class schedule	☐ Attach a class schedule
\square Syllabus outlining required tools/equipment	\square Syllabus outlining required tools/equipment
☐ Receipts documenting purchases	☐ Receipts documenting purchases
Aviation Lab Fees:	Health Care/Limited Entry Program:
☐ Attach a class schedule	☐ Attach copies of your acceptance letter and class schedule
\square Syllabus outlining required lessons	\square Syllabus outlining required tools/equipment
	☐ Receipts documenting purchases
Culinary: ☐ Attach a class schedule	
☐ Syllabus outlining required tools/equipment	
☐ Receipts documenting purchases	
OTHER ALLOWABLE EXPENSES – SEE REQUIRED DOCUMENT	TATION FOR EACH CATEGORY:
☐ Child/Elderly Care — Attach a copy of a receipt of expenses paid appropriate signatures. If the provider is an individual, a notarized sindividual's tax return. Documentation must include payments made	by you and a letter from the childcare provider/agency with statement will be required that income is reported on the
☐ Disability Expenses, Educational Related – Please attach a copy the disability-related expense was necessary. Documentation must	of a receipt paid by you along with written documentation on why include payments made by a third-party/organization.
SECTION 3: CERTIFICATION AND SIGNATURE:	
I certify the information on this Cost of Attendance Adjustme accurate, true, and complete to the best of my knowledge. I CSN Financial Aid Office. Incomplete requests (missing docur denial. The decision for the Cost of Attendance Adjustment reviewed <u>if</u> your circumstances have changed.	will provide additional information if requested by the mentation, information, and/or signatures) are subject to
Student signature:	Date: