

Cost of Attendance Increase Request

Name: _____ Student ID: _____

Semester(s) for Review: Fall 20 _____ Spring 20 _____ Summer 20 _____

The Cost of Attendance (COA) allows students to request a budget increase to include unforeseen expenses. All expenses must occur during the current academic year while enrolled at The University of Baltimore and must be documented.

Before You Begin

Please review the following before submitting this form:

- Visit our [COA Adjustment webpage](#) to understand eligible expenses and items that are **not** considered for COA adjustments.
- Review your program's current COA in the **Student Center** section of your MyUBalt portal.
- Complete a budgeting session on **iGrad** and attach a screenshot of completion with your appeal.
- Do **not** submit this form if your total expenses do **not** exceed your current cost of attendance.
- All claimed expenses must be accompanied by **appropriate documentation**. Expenses listed without supporting documentation will not be reviewed.
- Appeal decisions will be communicated via your UBalt email.
- If approved, you may become eligible to apply for additional federal and/or credit-based loans.
- **Only one budget increase request is permitted per academic year.**

Eligible COA Adjustment Categories & Documentation Requirements

Please check the applicable category below and include all required documentation:

1. Rent (Maximum allowed: \$2,200/month)

Required Documentation:

- a) A written explanation of extenuating circumstances for rent exceeding standard budget.
- b) A signed and dated lease including all resident names. For private or handwritten leases, notarization is required.
- c) Lease must list the monthly rent amount.
- d) Three recent bills confirming your current address.

2. Books and Supplies

Required Documentation:

- a) Receipts showing items purchased by the student.
- b) Course syllabus to match purchases, if applicable.

3. Tuition and Fees

Required Documentation:

- a) Copy of your tuition statement.

4. Computer Expense- The cost of purchasing a computer may be added to the student's COA only once per academic career and may not exceed \$1,400.

Required Documentation:

- a) Receipt confirming student payment.
- b) Proof of delivery (if purchased online).

5. Commuting Expenses

Required Documentation:

- a) Proof of current address (bill or statement within the last 30 days).
- b) Copy of student's class schedule.
- c) Receipts for transportation-related expenses (e.g., tolls).

6. Child/Dependent Care Expenses

Monthly Maximums:

- a) Ages 0–4: \$600 per child
- b) Ages 5–12: \$300 per child
- c) Dependent care (e.g., elderly parent): \$400 per individual

Required Documentation:

- a) Three recent receipts from daycare. The receipts must be on the daycare letterhead or be notarized if the daycare facility does not have letterhead paper and must contain payment date and monthly amount paid.
- b) A copy of federal taxes from a prior year to show that the dependent was claimed on taxes.
- c) Birth certificate(s) for children.
- d) Power of attorney for other dependent care.

7. Unforeseen Medical, Dental, or Optical Expenses Not Covered by Insurance (Maximum: \$5,000/year)

Required Documentation:

- a) Copy of itemized bill and/or Explanation of Benefits (EOB) showing dates and description of services provided to the student.
- b) Copy of paid receipts and medical/dental/optical payment plan documentation (if applicable). The receipts **MUST** show that the student paid the expenses.

8. Disability-Related Expenses (Not Covered by Third Parties)

Students may request a Cost of Attendance increase for disability-related expenses that are not covered by a third party (e.g., insurance, government agencies). Eligible expenses must be incurred during the academic year. The maximum allowable increase for disability-related expenses is **\$5,000 per academic year**.

Required Documentation:

- a) Documentation of the disability and the total out-of-pocket costs incurred (e.g., itemized receipts, proof of payment).
- b) Proof that the expenses are not covered by a third party (e.g., denial letter or statement from insurance or other agencies).
- c) A letter from a licensed physician or medical professional verifying that the services or accommodations are necessary.

9. Study Abroad Expenses**Required Documentation:**

- a) Documentation from the Study Abroad Coordinator outlining standard costs (excluding surcharges).

10. Health Insurance for Study Abroad Program**Required Documentation:**

- a) Cost estimate for health insurance from Study Abroad Coordinator.
- b) Copy of insurance policy.

11. Licensing, Certification, or First Professional Credential**Required Documentation:**

- a) Confirmation from academic adviser or University official that the license/certification is required.
- a) Proof of payment.

Certification

Initial and sign below to affirm your understanding and agreement:

- ☐ I certify that the information provided in this form is true and complete.
- ☐ I understand that submitting this appeal does not guarantee approval.
- ☐ I acknowledge that this request may not result in changes to my financial aid eligibility.
- ☐ I understand that this is not an application for a loan, nor does it release me from any payment due.
- ☐ I understand that an approval does not guarantee additional loan funding.
- ☐ I acknowledge that appeals must be submitted by the due date for the semester.
- ☐ I understand that providing false information may result in denial, aid reduction, or repayment.
- ☐ My signature affirms the accuracy and truthfulness of this appeal and its documentation

Student's Signature: _____ **Date** _____