

Cost of Attendance Appeal

This form is used to request adjustments to budget components for educational expenses not already covered in the cost of attendance. Only educational expenses incurred within the academic year may be considered. *Receipts and/or documentation is required*. This may result in a revised financial aid award.

Academic Year 2022-2023

Return this completed form to:

Office of Financial Aid & Scholarships University of Minnesota Crookston 4 Hill Hall 2900 University Ave Crookston MN 56716

Questions?

Ph: 800-862-6466 Ph: 218-281-8550 Fax: 218-281-8579 umc-fa@umn.edu

Student Information								
Full Name			Birthdate				Social Security Number	
Address (street or PO box, city state, ZIP)								
Student ID	UMC Ema	ail					Contact Phone Number	
Costs of Attendance								
		Fall Budget		Fall Ac	tual	Spring Budge	et Spring Actual	Revised COA
Tuition & Fees								
Books & Supplies								
Room & Board								
Transportation Costs								
Personal/Misc./Loan Fees								
Other								
Computer purchase for educational use (one-time, online programs only)								
Please provide a statement to tell us why you are requesting this adjustment:								
l								
Certification								
You must sign this form certifying that the information you provided is true. Misrepresentation of facts in connection with this form may be sufficient cause, in and of itself, for cancellation or repayment of financial aid, whenever discovered.								
Student Signature					Date			