

# Cost of Attendance Adjustment Request

STUDENT FINANCIAL SERVICES

204 S. College Avenue  
College Place, WA 99324-1198  
fax (509) 527-2556  
sfs.wallawalla.edu

Student Name: \_\_\_\_\_ WWU Student ID: \_\_\_\_\_

To request an adjustment to your standard cost of attendance budget, please outline your actual monthly education related expenses below. **When applicable, submit supporting evidence of your expenses.**

Category	Monthly Expense	Quarterly Expense	Yearly Expense
Housing:			
Rent/Mortgage:	_____	_____	_____
Utilities:	_____	_____	_____
_____	_____	_____	_____
Food:	_____	_____	_____
Transportation:			
Fuel:	_____	_____	_____
Car Insurance:	_____	_____	_____
_____	_____	_____	_____
Personal Expenses:			
_____	_____	_____	_____
_____	_____	_____	_____
Books & Supplies:			
Dependent Care:	_____	_____	_____
Other:			
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

Other requested budget adjustments:

- ☐ I need to purchase a computer for educational purposes. Cost of computer \$ \_\_\_\_\_ (attach receipt or purchase order)
- ☐ I have flying costs for Aviation. (Attach completed Aviation Checklist from your instructor)
- ☐ I plan to attend summer school. Number of credits \_\_\_\_\_ Location of summer classes \_\_\_\_\_
- ☐ Other - Please explain:

Student Signature \_\_\_\_\_

Date \_\_\_\_\_

