

Solano Community College Financial Aid Office
Budget Adjustment Request Instructions
Academic Year 2018-2019

Instructions: You may request to have additional educationally related costs added to your Cost of Attendance/Student Budget. Costs must have been incurred by you during the fall and/or spring semester to be considered. Payment documentation must verify you made the payments. Attached proof of payments (credit card receipts, cancelled checks, bank statements, etc.) for all of your expenses. Listed below are the types of expenses we will be able to consider and the documentation required.

Automobile repair and expenses: Car repairs not covered by insurance and car registration paid during the academic year. Include make, model and year of your vehicle along with itemized invoices showing the work being done.

Automobile Insurance: Provide a copy of your insurance policy (not your card) that includes your name, premium amount, and policy period.

Mileage: If you have extraordinary mileage costs commuting to and from our campus, such as commuting more than 50 miles round trip, three or more days per week, provide a signed statement indicating the make, model, and year of your vehicle. Also submit a Google Map printout from your home to the campus and a copy of your class schedule.

Medical/Dental/Optical: If you have these expenses and they are not covered by insurance or MediCal, provide a copy of your health care provider's billing statements that show your costs, date of treatment, and the amount you paid. Projected expenses may be considered if they occur during the academic year and your health care provider's statement is signed on company letterhead, indicating the required treatment and medical costs, and scheduled date of treatment.

Medical Insurance: Provide a copy of your insurance policy (not your card) that includes your name, premium amount, and policy period.

Computer hardware and software allowance: Computer expenses allowed for school use include a CPU, monitor, keyboard, printer and relevant software. A computer workstation plus one hardware and/or software upgrade, not to exceed \$2,000 **is allowed once** per your attendance at Solano Community College. If the computer workstation was purchased during a period of non-enrollment, but you are making payments during the academic year, those payments may be considered. Provide a copy of your purchase order that includes your name, date, and amount.

Child Care: Attach a signed letter detailing the hours each day, which days per week, and the amount you pay each week for each child. Indicate whether or not you are qualified for reductions or forgiveness of any of these costs. Attach a copy of your class schedule.

Also provide a statement from your childcare provider on their letterhead indicating the name and age of each child, the days that childcare is provided and the weekly daycare costs associated with each child. If your childcare provider does not have letterhead, his/her signed statement must include their contact information and the address where the daycare is provided.

Solano Community College Financial Aid Office
Budget Adjustment Request
Academic Year 2018-2019

Student Name: _____

SCC ID #: _____

I am requesting a budget adjustment to allow for the following expenses (check appropriate box). Attach additional statements if needed. Be sure to attach proof of your expenses. Expenses must have occurred during the 2018-19 Academic Year.

8/13/18 to 5/23/19 for the Academic Year; 8/13/18 to 12/16/18 for Fall Only; 1/14/19 to 5/23/19 for Spring only.

Automobile Expenses			
Registered Owner:	Make:	Model:	Year:
Date of Service	Name of Service Provider	Type of Service	Cost of Service
Medical/Dental/Optical Expenses			
Date of Service	Name of Service Provider	Type of Service	Cost of Service
Computer Expenses			
Date of Service	Name of Service Provider	Type of Service	Cost of Service
Child Care Expenses			
Date of Service	Name of Service Provider	Type of Service	Cost of Service

My signature certifies that this information is complete and accurate, and I have included appropriate receipts and documentation to support my request. **WARNING:** if you purposely give false or misleading information, you will be reported to the U.S. Department of Education Office of Inspector General, and you may be fined, sentenced to jail, or both.

Student Signature

Date

For Financial Aid Office Use Only

<input type="checkbox"/> Request Denied	<input type="checkbox"/> Request Approved		
Comments:			
Specialist:	Date:	FAD:	Date: