



# 2025-26 COST OF ATTENDANCE BUDGET ADJUSTMENT

STUDENT INFORMATION	
Last Name:	First Name:
Student ID #:	Email:

We recognize you may have additional expenses affecting your financial ability to attend college. Our office uses a standardized budget to establish your **Cost of Attendance**, which includes tuition/fees, books/supplies, housing/food, transportation, and personal expenses.

You may request consideration of additional expenses by completing this form **AND** providing documentation or receipts to **confirm the costs**. All requests are reviewed on a case-by-case basis. Submitting a request for an increase in your Cost of Attendance does not guarantee that you will be eligible for more student aid.

**I am requesting an adjustment to my Cost of Attendance due to the following reason(s) – Check all that apply:**

## HOUSING EXPENSES

- ☐ Dependent student (as defined by FAFSA/WASFA) living away from parent(s). **Required:** Complete and submit this form as certification that student does not live with parent(s).
- ☐ Rent/mortgage payment exceeding **\$1,400** per month (total rent/mortgage payment would be divided by number of people on lease/mortgage). **Required:** Provide a personal statement in the box provided below explaining your situation, housing expenses, and attach a copy of current lease/mortgage.  
**Note:** While any amount exceeding **\$1,400** can be submitted for review, the Financial Aid Office will only make adjustments on rent/mortgage amounts up to **\$2,000** per month.

## CHILD CARE EXPENSES

- ☐ Childcare expenses. **Required:** Attach documentation showing actual or projected out of pocket expenses, including most recent billing statement – **OR** – receipt with list of name(s) and age(s) of each child under 12.
- ☐ Daycare/Educational Costs for Disabled or Special Needs Dependents. **Required:** Attach documentation showing actual or projected out of pocket expenses, including most recent billing statement – **OR** – receipt with list of name(s) and age(s) of each child under 12.

## TUITION/FEES/BOOKS/COMPUTER EXPENSES

- ☐ Increased tuition/fees costs in excess of 12 credits per quarter.
- ☐ Excessive books/supplies - costs in excess of **\$300** per quarter. **Required:** Attach copy of estimate – **OR** – receipt for recently purchased books/supplies for classes taken for the quarter.
- ☐ One-time adjustment for computer costs (hardware/software) purchased for educational purposes. **Required:** Attach copy of estimate – **OR** – receipt for recently purchased computer. Maximum adjustment is **\$2,000**.

## TRANSPORTATION EXPENSES

- ☐ Excess transportation expenses such as major car repair. **Required:** Attach documentation showing actual or projected cost for repair such as a bill, receipt, or quote.
- ☐ Commuting in excess of 50 miles each way per week: I commute \_\_\_\_\_ miles each way \_\_\_\_\_ day(s) **per week** to attend classes – **OR** – required internship.  
**Note:** For commuter mileage to be considered, mileage from home to campus – **OR** – home to internship must exceed 50 miles **each way per week** (mileage verified by using home address in ctcLink). \*If student is not in an internship, put N/A in the section below.

INTERNSHIP INFORMATION*
Internship Name:
Internship Address:
City/State/ZIP:



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## STUDENT INFORMATION

Student Name:

Student ID #:

### MEDICAL EXPENSES

- ☐ Medical expenses such as emergency medical costs. **Required:** Attach documentation showing actual medical bills/receipts or a projected cost invoice from provider.

### OTHER EXPENSES

- ☐ OTHER: I have additional expenses that do not meet the categories listed above (such as legal fees or other *significant* unexpected expenses). I would like to have them reviewed by the Financial Aid Office for inclusion in my **Cost of Attendance**. I included a personal statement below outlining the expense and attached documentation showing the actual or projected cost to support my request.

— I certify that the facts presented on this form and any attached documents are true and correct.

— I understand an increase in my Cost of Attendance does not guarantee that I will be eligible for more student aid and may take up to 4 weeks for review and processing.

Attach Documentation



Student's Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Lower Columbia College does not discriminate on the basis of sex and prohibits sex discrimination in any education program or activity that it operates, as required by Title IX, including in admission and employment. Lower Columbia College provides equal opportunity in education and employment and does not discriminate on the basis of race, color, national origin, citizenship or immigration status, age, perceived or actual physical or mental disability, pregnancy, genetic information, sex, sexual orientation, gender identity, marital status, creed, religion, veteran or military status, or use of a trained guide dog or service animal as required by Title VI of the Civil Rights Act of 1964, Title VII of the Civil Rights Act of 1964, Title IX of the Educational Amendments of 1972, Sections 504 and 508 of the Rehabilitation Act of 1973, the Americans with Disabilities Act and ADA Amendment Act, the Age Discrimination Act of 1975, the Violence Against Women Reauthorization Act and Washington State's Law Against Discrimination, Chapter 49.60 RCW and their implementing regulations. All inquiries regarding compliance with Title IX, access, equal opportunity and/or grievance procedures should be directed to Vice President of Foundation, HR & Legal Affairs, 1600 Maple Street, PO Box 3010, Longview, WA 98632, [title9@lowercolumbia.edu](mailto:title9@lowercolumbia.edu), Phone number, (360) 442-2120, Phone number/TTY (800) 833-6388. The notice of nondiscrimination is located at [lowercolumbia.edu/disclosure/non-discrimination](https://lowercolumbia.edu/disclosure/non-discrimination).