Procedures for Budget Change Requests

- Submitting a Budget Revision Request form may result in additional student loans being awarded to the student. As such, it is recommended that the student also complete a Financial Awareness Counseling session at [www.studentloans.gov](http://www.studentloans.gov). This session should be completed prior to submitting a Budget Revision request. Please attach a print out of the confirmation page once completed.

- A Budget Committee has been established to review all budget change requests. The committee will meet once a week. During peak financial aid periods, no budget change requests will be processed.

- Students will be allowed only one budget change request for living expenses per academic year.
  - Students will be allowed to turn in Budget Increase Request – Miscellaneous Expenses Forms throughout the academic year.
  - Reimbursement for medical, dental, home and car repairs will be made for expenses that were incurred during the current academic year.
  - Medical and dental expense can be reimbursed only for the student and student’s dependents. *(Federal regulations do not allow for a spouse’s medical or dental expenses.)*
  - Lifestyle choices/expenses will not be considered.

- Receipts will be required for designated items. Expenses without documentation will not be considered. Valid receipts include: signed copy of lease, mortgage statements, monthly utility bill statements and copies of insurance cards. Copies of cancelled checks or bank statements will no longer be accepted.

- Federal regulations will not allow our office to make adjustments for vehicle payments, credit card debt or any other consumer debt.

- Minimum and maximum ranges have been established for each expense based on family size.

- Funds for away rotations have been included in the original budgets as required by your programs.

- Conference expenses and professional organization meetings cannot be reimbursed.

- Vacation travel and pet care costs cannot be reimbursed as these are not allowable educational expenses.

I have read and understand the procedure for requesting a budget change. By signing this form I accept the responsibility of additional loan debt.

Student’s Signature ___________________________ Date ___________________________

Spouse’s Signature ___________________________ Date ___________________________

Student’s Email Address ___________________________________________________________________
Texas Tech University Health Sciences Center – Office of Student Financial Aid

Budget Change Request For ______________________ (indicate school year; i.e. 2017-2018)

Applicant’s Name ___________________ Student ID _______________ School ______ Classification ______

Please briefly explain your circumstances for requesting additional funds for the current academic year. Attach additional sheet if necessary.

________________________________________________________

*Please attach receipts for expenses. Must be copy of bill and lease or mortgage statement and it must show your name. If your name is not on the bill, please provide explanation.

**Room & Board**
- Housing/Rent
- Gas
- Water, Sewer, Other
- Electric
- Phone (Cell/Landline)

**Monthly Amounts**

Household Size (attach additional sheet if necessary)

List everyone in your household

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<th>Relationship</th>
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**Car/Transportation** – *Provide copy of insurance card
- Insurance
- Gasoline
- Normal Maintenance

**Monthly Amounts**

**Child Needs**
- Formula
- Diapers
- Supplies

Please submit a childcare expense form for any daycare costs.

Form available at: www.ttuhsc.edu/financialaid

**Miscellaneous** – *Provide copy of insurance cards
- Life Insurance
- Health Insurance
- Home/Renters Insurance
- Clothing
- Entertainment
- Personal
- (Cleaning, laundry, etc.)

**Monthly Amounts**

**Other expenses:** medical, dental, car repairs, etc. Provide copy of bills, statements, or estimates with your name and date (or expected date of service.)

________________________________________________________

Spouse’s Name ___________________________ Spouse’s SS# __________________

Spouse’s Occupation & Employer _________________________

Spouse’s Monthly Salary _________________________ Paid (please circle): monthly bi-weekly weekly

Spouse attending college? □ Yes □ No If so, list college attending: __________________________

I certify that all of the information on this form is true and correct to the best of my knowledge. By signing this form, I (we) confirm I (we) have read both forms and understand the implications of borrowing additional loans.

Student’s Signature ___________________________________ Address _________________________

Spouse’s Signature ___________________________________ City/State/Zip ______________________

Date ___________________________ Phone ___________________________