

## 2019-2020 Cost of Attendance Adjustments

### SECTION A: STUDENT INFORMATION

Name:

UNT Assigned ID:

SSN (last 4 digits only):

### SECTION B: TYPE OF ADJUSTMENT REQUESTED

Select the Cost of Attendance adjustment you are pursuing and attach the required documentation indicated below:

- Disabled student expenses. **Required documentation:** List of items required for student to attend and complete successfully in their classes and are unreimbursed by other agencies. Must include receipts of expenses. Expenses must be for 2019-2020 academic year.
- Professional License or Certificate. **Required documentation:** Letter from department indicating the purchase of the license or certificate is required by a state or required to practice or be employed in their profession and receipts of expenses for the purchase of the license or certificate. Expenses must be for 2019-2020 academic year.
- Unreimbursed non-elective dental or medical expenses. **Required documentation:** Written explanation of expenses. Receipts of incurred expenses or proof of deposit paid that is not covered by insurance. Student only. Expenses must be for 2019-2020 academic year.
- Purchase of instrument or other item(s) for academic purposes. **Required documentation:** Letter from department or professor indicating the purchase of the instrument or other item(s) is required for student to be successful in academic program and receipts of expenses for the purchase of instrument or item(s). Expenses must be for 2019-2020 academic year.
- Purchase of a computer (One time adjustment per academic career). **Required documentation:** For standard increase, a paid receipt or detailed estimate must be submitted. If special computer/equipment is required by the department for the student to be successful in their program, a letter from the department or professor indicating why these items are needed must be submitted along with a paid receipt or detailed estimate. Expenses must be for 2019-2020 academic year.

### SECTION C: CERTIFICATION

By signing this form, I certify that this form and all required documentation is complete and accurate. I also certify that these expenses are needed for me to be successful in my academic program. I understand that a request may be denied or limited for any reason and additional documentation may be needed from me. **Electronic signatures are not accepted.**

Student Signature

Date

X \_\_\_\_\_

\_\_\_\_\_

**Return this completed form with any required documentation to:**

Student Financial Aid & Scholarships, University of North Texas - 1155 Union Circle #311370, Denton, TX 76203-5017  
or fax to (940) 565-2738 or save and attach as PDF and email to [financialaid@unt.edu](mailto:financialaid@unt.edu)