

PORTLAND STATE UNIVERSITY

Cost of Attendance Increase

Office of Student Financial Aid and Scholarships

Student's Name:		ID#:			
(Please print)	Last	ast	First		
PLEASE SELECT AID YEAR:		0	2019-2020 (Fall 2019, Winter 20 2020-2021 (Fall 2020, Winter 20		

The U.S. Department of Education gives schools the authority known as professional judgment (PJ) to adjust a student's standard cost of attendance for educationally-related expenses on case-by-case basis according to their school policies and procedures. This form is to request Portland State University use professional judgment to increase your individual cost of attendance. If you would like an increase to your cost of attendance based on your special circumstances, please follow the instructions on this form. Please note that this request may or may not be approved.

STEP ONE (mark the allowable cost of attendance increase/s you would like to request):

- O Computer Costs an increase up to \$1,500 to accommodate the purchase of a computer once during your eligible degree program. Attach an advertisement for the computer you plan to buy, including image and cost of the computer to this signed form.
- O PSU Health Insurance Premium an increase for your quarterly premium for PSU's health insurance plan. We will adjust your cost of attendance for this PSU health insurance premium for all terms you were charged.
- O Tuition Adjustment an increase for tuition and fee costs that are greater than the amount estimated in your standard Cost of Attendance. Tuition adjustments include (if applicable): base and differential tuition, mandatory fees, special course fees (ex: online fees, inquiry fees) and the matriculation fee. Please indicate below the estimated credits you plan to take for each term.

_____ Fall _____ Winter _____ Spring _____ Summer

O Childcare Costs – an increase for child care expenses. Complete the attached child care provider statement on page 2 and attach billing documentation to this signed page 1.

STEP TWO (indicate if you would like an increase to your aid):

If this request is approved, we will increase your loans up to your maximum eligibility unless otherwise noted below.

O I want a specific loan increase of: \$_____

- O I do not want a loan increase. I anticipate assistance from Jim Sells, Ford Family Foundation Scholarship or another need based scholarship.
- O I do not want a loan increase and have no other need based scholarships. I understand that this request will <u>not</u> increase my Federal Pell Grant eligibility.

By signing this form, you are certifying the information to be true and agree to submit additional documentation if requested.

Student Signature: ____

(No typed signatures permitted)

Mailing Address: Office of Student Financial Aid and Scholarships Portland State University PO Box 851 Portland, Oregon 97207-0851 Physical Address: Fariborz Maseeh Hall Portland State University 1855 SW Broadway Portland, Oregon 97207-3295 Date: ____

 Phone:
 (503) 725-3461

 Fax:
 (503) 725-5965

 Toll-Free:
 (800) 547-8887

 Department use only: COAINC

<u>Childcare Provider Statement – Page 2</u>

Please use this form to provide information for your increased Cost of Attendance charges for childcare costs. This request will not be approved for the cost of private school tuition or enrichment programs that are not considered childcare.

Is the spouse/other parent is enrolled at Portland State University?

- o No, my spouse/the other parent is not enrolled at Portland State University
- Yes, my spouse/the other parent is enrolled at Portland State University and I will provide their name and student ID below:

Other parent's name	Other parent's Student ID

Please provide information about your child/children:

Name of child	Age of child	Number of months childcare will be provided from Sep. – Aug.

Provide information about your childcare provider:	
Print name of childcare provider (company or individual)	Provider's phone number (required)
Address of provider	

Documentation (use checklist below to submit documentation to the Office of Student Financial Aid & Scholarships):
 O Completed and signed Cost of Attendance Increase form (page 1)
 O Completed Childcare Provider Statement (page 2)
 O A copy of a check, receipt, or invoice from the provider within the school year

Mailing Address:

Office of Student Financial Aid and Scholarships Portland State University PO Box 851 Portland, Oregon 97207-0851

Physical Address:

Fariborz Maseeh Hall Portland State University 1855 SW Broadway Portland, Oregon 97207-3295
 Phone:
 (503) 725-3461

 Fax:
 (503) 725-5965

 Toll-Free:
 (800) 547-8887

 Department use only: COAINC