

314 Shields Building University Park, PA 16802 814-865-6301 FAX 814-863-0322 studentaid.psu.edu

| ITEMIZED COST OF ATTENDANCE EVALUATION FORM | | |
|--|---|--|
| Student's Name: | PSU ID: | |
| Academic Year: | Reason Issued: | |
| Provide all documents for the item(s) you check on Step Include all elements required in Step 2 – "Statement of I Sign and return the completed form (Step 1 & 2) and an University Park - https://upload.studentaid.psu.e Other Penn State Locations - the financial aid r | Explanation" y required attachments to: edu/ | |
| Step 1 - Reason for Cost Increase / Required Documentation: (| Check each box that applies) | |
| Rent Attach a copy of your current lease or rental agreement Complete Step 2 - "Statement of Explanation" indicating The statement must address all of the following: Reason for increased expense Amount paid for monthly rent Number of people residing in residence | the conditions/circumstances which require you to pay more rent. | |
| Medical Expenses Attach copies of bills or receipts of costs incurred Complete Step 2 - "Statement of Explanation" indicating insurance or above average medical expenses. The statement of Explanation in Indicating insurance or above average medical expenses. The statement in Indicating insurance or above average medical expenses. The statement or illness or condition, details are not the Length of time illness or condition has existed in Required treatment for illness or condition and the Cost for treatment and/or medication not cover the Insurance Cost − reason for different insurance | required (for medical expenses only) and time period for the treatment | |
| transportation expenses. The statement must address a | or other related educational activities necessitated by course ent is required to help cover educational expenses | |
| Student's Dependent Care Expenses Attach contract or documentation from dependent care in the Complete Step 2 - "Statement of Explanation" indicating commuting during periods of enrollment. The statement is Hours care is required ➤ Hours care is required ➤ Type of care required (Examples: daycare, home in the Cost of care while student is attending class during its applicable reason for spouse's inability to provide the contract of the Cost of the Cost | the need for dependent care while attending classes, studying and t must address all of the following: health care, etc.) ng period of enrollment | |

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➤ Number and age of dependents requiring care

| nowled | signing this document, I certify that all the information provided on this document and any attachment is true and complete to the best of mge. The funds received will be used for the purpose indicated on this form. If I purposely give false or misleading information on this document, ause for denial or repayment of student aid and I may be fined, be sentenced to prison, or both. |
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| | s required for the items marked in Step 1. Attach an additional page, if necessary. Be sure to sign any additional pages to your statement. |
| • | 2 – Statement of Explanation ace below, provide a detailed statement indicating the circumstances for your request to increase your cost of attendance. Be sure to include all |
| 24 | Complete Step 2 - "Statement of Explanation" indicating the need for the cost increase |
| | Attach receipts and documents which support the expense/purchase listed above |
| | Reason for the expense/purchase |
| | Other |
| | Amount of the expense The amount of support received from any assisting agencies providing support for the expense. |
| | ➤ Type of expense |
| | statement should address all of the following: Reason for the expense |
| | • Complete Step 2 - "Statement of Explanation" indicating the increased expenses incurred as the result of your disability. The |
| Ц | Disability Expenses Attach receipts and documents confirming the expense |
| | Complete Step 2 - "Statement of Explanation" indicating the conditions/circumstances that require you to incur increased living expenses due to your co-op/internship. Disability Expenses. |
| | |
| | Electric \$ Phone \$ Other Utility \$ Clothing \$ Other (specify) \$ |
| | Rent \$ Food \$ |
| | Attach receipts and documents confirming the expenses/purchases Itemize your monthly expenses |
| | Co-op/Internship Expenses |
| | NOTE: If you attend Penn State both fall and spring semesters, your increase in cost and aid eligibility will be split equally between both semesters unless otherwise requested. |
| | Computer cost is over \$2000 (\$2,700 for laptop) requires a statement from a faculty member in your department indicating why this computer/software is needed for your required course work. |
| | Computer cost is over \$1,500 (\$2,200 for laptop) the statement must include an explanation of why this type of computer, including various upgrades, options, etc. is needed for your required course work. |
| | You also must include the following if applicable: |
| | • Complete Step 2 - "Statement of Explanation" explaining your request for an increase to the cost for the purchase a computer for educational purposes. |
| | components and pre-loaded software. For information on computer purchases through Penn State, refer to http://computerstore.psu.edu/ . |
| | |
| Ц | One-Time Computer Purchase/Rental Attach a copy of your receipt with the date of purchase or a copy of an estimated invoice from a vendor listing the computer and the state of the state |