

COST OF ATTENDANCE INCREASE FORM

ACADEMIC YEAR
2019-2020

Please review: A financial aid student budget provides for a “moderate” cost of living while studying for your degree. Increasing your cost of attendance **does not**

always result in additional financial aid. However, we will award any remaining eligibility you have for a Federal Graduate PLUS loans once this form is approved and your credit authorized by the Department of Education. The Grad PLUS loan is available at www.studentloans.gov.

If you have any questions, or do not know your eligibility, contact the Financial Aid Office at (619) 961-4270 or at financialaid@tjssl.edu.



Name: _____ TJSL ID: _____

Phone (____) _____ E-mail _____

The Financial Aid Office develops standard allowances for educational expenses, which are used to determine a student’s eligibility for financial aid. If you will incur additional educational expenses and wish to be considered for a cost of education increase, complete this form and return it to the Financial Aid Office at Thomas Jefferson School of Law.

Select the Time Period for which this form applies:

____ Fall/Spring ____ Fall Only ____ Spring Only ____ Summer

D HEALTH INSURANCE

You must provide an account statement with the total costs of your school sponsored health insurance payment. The monthly health insurance fee is calculated at \$250/month. Your student budget will not be increased if you are being covered by your parent’s plan.

D CHILD CARE EXPENSES

You must include an official statement from your child care provider stating the name of the child, total cost, and the semester(s) the expense is incurred. Students who file a joint tax return or are married will be eligible to have half their child care expenses covered through their student budget.

D COMPUTER EXPENSES

You must provide an itemized receipt after your computer is purchased. Students will be allowed one allowance during their educational career at TJSL, with a purchase cap of \$1,200. The computer must be purchased during the award period to be considered for a budget increase.

D OTHER EDUCATIONAL EXPENSES

You must provide a detailed statement (may use back of form) explaining your request, the total cost you will incur, and a letter from your provider stating that it is required for your educational program.

**Student
Signature**

Date

