

**SETON HALL UNIVERSITY SCHOOL OF LAW**  
Office of Enrollment Services

Student Name \_\_\_\_\_

Student ID \_\_\_\_\_

**Request for Budget Increase Form**

Academic Year: \_\_\_\_\_

Most students find that our standard cost of attendance (COA) budgets will meet their needs to cover tuition, fees, and basic living expenses. With proper documentation, budget adjustments may be made to cover valid, educationally related expenses. Budget adjustments are not permitted for: car payments, revolving debt such as credit cards, security deposits, and moving expenses. Requests for budget adjustments must be made in writing and will be considered for costs incurred during the academic year only. This form is designed to assist you with this request.

The total of all aid may not exceed your cost of attendance. Approved increases to the COA will only result in an increase to your eligibility for student loans and/or federal work-study.

**Section I. Reason for Request:** Please explain the reason for your request (below or attach a separate letter) and attach any supporting documentation. Page 2 is required if you are requesting an increase to living expenses.

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Please list the total additional amount that you will need to cover educationally related expenses for the academic year (August to May). \$\_\_\_\_\_. Your documentation should support this amount.

**Section II. Supporting Documentation:**

\_\_\_\_\_ **Health Insurance** – Health insurance for yourself may be added to your Cost of Attendance if you are not covered by your parent’s or spouses’ insurance.

\_\_\_\_\_ Are you taking the health insurance through the law school?

\_\_\_\_\_ Are you taking the health insurance on your own? (Attach documentation of annual cost.)

\_\_\_\_\_ **Laptop Purchase**- Attach a copy of the receipt for your laptop purchase made after July 1 for the the coming year, up to \$1,500.

\_\_\_\_\_ **Rent** - A copy of your lease – in excess of \$1,400 per month (up to a maximum of \$1,600 per month)

\_\_\_\_\_ **Utility Bills**

\_\_\_\_\_ **Transportation Expenses** (including parking) – transportation expenses do not include the cost of purchasing or leasing a car, but rather the cost of transportation to and from school.

- How many miles do you drive one-way to school? \_\_\_\_\_

\_\_\_\_\_ **Unusual, non-reimbursed, medical or dental expenses**

\_\_\_\_\_ **Dependent Care Expenses:** Expenses are restricted to costs for a legal dependent incurred while you are attending classes. Your documentation should include the costs along with the names, ages and number of months that dependent care will be provided.

\_\_\_\_\_ **Other:** \_\_\_\_\_

\_\_\_\_\_

**SETON HALL UNIVERSITY SCHOOL OF LAW**  
Office of Enrollment Services

**Section III. Monthly Expenses**

Please submit information relating to you, the student only. If you share monthly costs, please submit your portion of the costs.

**Living Expenses:**

	Monthly	9 Months
Housing (Rent or Mortgage)		
Food		
Utilities		
Electric/Gas/Oil/Water/Sewer		
Telephone		
Cable/Other		
Transportation (gas, parking, etc.)		
Medical and Dental Care not covered by insurance <i>(attach documentation)</i>		
Child / Dependent Care		
Personal (Clothing, personal care, etc.)		
Other		
<b>Total Living Expenses:</b>	<b>\$</b>	<b>\$</b>
<b>Seton Hall Law Monthly Living Expense Allowance:</b>	<b>\$</b>	<b>\$</b>
<b>Difference (monthly)</b>	<b>\$</b>	<b>\$</b>

**Section IV. Monthly Resources:** Please list any financial resources other than financial aid:

Earnings		
Savings		
Other Income (specify)		
<b>Total:</b>	<b>\$</b>	<b>\$</b>

**Other things to know:**

The Academic Year Financial Aid Budgets (Cost of Attendance) are calculated for the fall/spring 9-month academic year. By signing below, you are certifying that the information submitted is true to the best of your knowledge and that all financial aid funds you receive will be used for educational expenses. You are also acknowledging that if you fail to submit adequate documentation to support this request, your request for a budget adjustment will not be processed.

\_\_\_\_\_  
Student Signature

\_\_\_\_\_  
Date

\_\_\_\_\_ Approved

\_\_\_\_\_ Denied

Comments: \_\_\_\_\_

\_\_\_\_\_  
FAA Signature

\_\_\_\_\_  
Date