THE UNIVERSITY OF TOLE DO

# 2025-26 Cost of Attendance Adjustment Request Process

COMPLETE WITH BLACK INK ONLY.

When awarding financial aid, the Office of Student Financial Aid (OSFA) assigns you a budget, often referred to as the **Cost of Attendance (COA)**. The COA includes, but is not limited to, tuition and fees, room and board, books and supplies, personal expenses, and transportation.

When additional education-related expenses <u>beyond</u> your standard COA are incurred, you may request a COA adjustment by completing a Cost of Attendance Adjustment Request. COA adjustments are evaluated on a case-by-case basis and are subject to federal and University policies.

### **Cost of Attendance Adjustment Guidelines**

The OSFA may increase your COA under certain circumstances to include additional education-related expenses **incurred by you (the student) during the aid year**. To be considered for a COA review, you must have completed a 2025-26 Free Application for Federal Student Aid (FAFSA) and have been awarded financial aid. The 2025-26 aid year includes summer 2025, fall 2025, and spring 2026.

Additional education-related expenses for which you may request a COA adjustment include:

- Tuition and/or fees exceeding your standard COA (this generally relates to those in academic overload).
- Cost of a meal plan for students living off campus or with parents.
- Course, lab, program, or clerkship fees exceeding your standard COA.
- Cost of the rental or purchase of a computer and/or mandatory course software, purchased during the aid year.
- Child care or dependent care costs not covered by a third party (subject to reasonable costs and time frames for which care is required).
- Student health insurance costs incurred by you during the aid year.
- Travel costs exceeding your standard COA.
- Disability related expenses.
- Professional licensure, certification, or first professional credential.

## **Supporting Documentation**

Refer to the Cost of Attendance Adjustment Request on page 2 for specific supporting documentation requirements. If you submit a Cost of Attendance Adjustment Request without the required documentation indicated on page 2, it will be denied.

## **Cost of Attendance Adjustment Process**

Your Cost of Attendance Adjustment Request and all required supporting documentation must be received at least three (3) weeks prior to your last date of attendance for the term.

Upon receipt of your Cost of Attendance Adjustment Request, the OSFA will review your expenses and supporting documentation. If your additional expenses qualify for a COA adjustment, your COA will be increased and your financial aid awards will be reevaluated for the aid year. An increase in your COA does not guarantee additional grant or scholarship aid; most COA increases typically result only in an increase in loan eligibility. If you are offered a Direct PLUS Loan, it is your or your parent's responsibility to complete the Direct PLUS Loan request process.

The OSFA will notify you of the results of its review via your Rockets email account. You can view aid eligibility changes through the myUT portal.

COAAR2 20241120

Student Rocket Number	Student Last Name	Student First Name



# 2025-26 Cost of Attendance Adjustment Request Term (circle one): SU25 FA25 SP26

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## **Additional Education-Related Expenses**

Check each applicable "Additional Expenses" category from the list below and attach the required documentation indicated for each category checked. Additional expenses must be incurred during the 2024-25 aid year to receive consideration.

M	Additional Expenses	Required Documentation
	Tuition and/or fees exceeding your standard COA budget.	None.
	Cost of a meal plan for students living off campus or with parents.	None.
	Course, lab, program, or clerkship fees exceeding your standard COA budget.	None.
	Cost of the rental or purchase of a computer and/or mandatory course software, purchased during the aid year. The maximum adjustment for a computer rental or purchase is \$2,000 per program of study.	Dated receipt/proof of rental or purchase.  Accessories, optional software, and warranties are not allowable costs.
	Child care or dependent care costs not covered by a third party.	Proof of child care or dependent care costs and proof of payment (e.g., billing statements, receipts, cancelled checks, etc.). Names and ages of the children/dependents receiving care. Detailed schedule of classes, field work, internship, or co-op.
	Student health insurance costs incurred by you during the aid year.	None (if billed through UToledo). Health insurance billing statement and proof of payment (if not billed through UToledo).
	The Washington Center (TWC) internship program fee and housing fee.	TWC program fee invoice. TWC housing fee invoice.
	Travel costs for Med 4 residency interviews.	An organized and totaled summary sheet listing all travel dates and expenses and, for each interview:  A copy of the interview agenda (with interview date, time, and location confirmation).  Copies of paid receipts (including detailed flight and hotel receipts, documentation of total mileage traveled using an online map tool such as Google Maps, etc.).
	Travel/lodging costs for Med 4 away rotations.	An itemized list of away rotations, including dates and expenses paid. Also include:  Documentation (in your name) identifying each away rotation's start date, end date, and location.  Copies of paid lodging receipts.  Documentation of home/local address.  Copies of paid travel receipts (including detailed flight and rental car receipts OR documentation of total mileage traveled using an online map tool such as Google Maps).

Student Rocket Number Student Last Nan		Student Last Name	Student First Name
		no travel to campus, field work, than 200 miles round trip per	Copy of driver's license. Proof of residence address (utility bill, lease, etc.). Detailed schedule of classes, field work, internship, or co-op. Address of field work, internship, or co-op location. Documentation of specific mileage (using an online map tool such as Google Maps).
	services, personal assistance,	curred by you including special transportation, equipment, and or by any agency or third party.	<ul> <li>Proof of costs and proof of payment (e.g., billing statements, receipts, cancelled checks, etc.).</li> <li>Physician or social services recommendation for these services, equipment, and supplies.</li> </ul>
	professional credential for pro	icensure, certification, or first	Copy of paid receipt(s) including detailed description of expense, date expense was billed, and date expense was paid.

### YOUR HANDWRITTEN SIGNATURE AND DATE ARE REQUIRED BELOW.

ELECTRONIC SIGNATURES ARE NOT ACCEPTABLE ON THIS FORM.

Certification Statement: I certify that the information I have provided on this form and all accompanying documentation is true and accurate to the best of my knowledge. I agree to submit additional documentation should the Office of Student Financial Aid make such a request. I understand that the information reported above may be used to recalculate my federal aid eligibility, and that I must have been awarded financial aid in order for my COA to be reviewed. I also understand that this request may be denied. WARNING: If you purposely provide false or misleading information on this document, you may be fined, sentenced to jail, or both.

Student Signature - <i>use full legal name</i>			
Student Signature - use ruii legai name	Dale		
For office use only			
☐ Approved			
☐ Denied			
OSFA Signature	Date		

### TO RETURN THIS FORM:

Upload to: myUT.utoledo.edu

"My Financial Aid"

"Financial Aid Documentation Upload"

Mail to:

The University of Toledo
Office of Student Financial Aid
2801 West Bancroft Street, Mail Stop 314

Toledo, OH 43606-3390

Rocket Solution Central In person:

1200 Rocket Hall

419.530.5835 Fax to:

**Questions? Please contact Rocket Solution Central** (RSC) at 419.530.8700.

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