Please complete and return this form to:



1000 W Campus Drive Wausau WI 54401-1899 Phone: 715.675.3331 * FAX: 715.301.2904

STUDENT INFORMATION

Last Name

First Name M.I.

NTC Student ID# _____Phone #_____

Email Address

2018-2019 REQUEST FOR REVIEW OF ADDITIONAL COSTS

If your total educational expenses exceed the educational budget that was used in determining your awards, you may request that these additional costs be reviewed. Your financial aid is awarded based on tuition and fees, books, supplies and equipment, and a standard monthly living expense. The living expense figure used by the Financial Aid Office is established through use of a student survey and/or U.S. Department of Labor Bureau of Labor Statistics Consumer Price Index (CPI). It represents a realistic estimate of modest, but adequate, living expenses. Living expenses are defined as room (rent/mortgage & utilities), board (food), personal (health, beauty, recreation, clothing, emergency medical & dental), and transportation costs (bus fare, gas, parking, car maintenance, insurance, vehicle/license/registration).

Please note: costs associated with lifestyle choices or consumer indebtedness (living without roommates, credit card purchases, cell phones, car payments, etc.) will not be considered.

Only one request for budget review will be reviewed each academic year. A student will typically be granted an increase only one time during a three-year period of time. Therefore, if granted an increase, in the future you should reduce your budget or obtain other means to cover living expenses which exceed the standard living expenses determined by NTC.

You can keep track of student loans that you have borrowed on the National Student Loan Data System's (NSLDS) website located at <u>www.nslds.ed.gov/nslds_SA/</u>.

Please see the back of this page to complete the rest of this form.

Please provide figures requested below. Attach receipts and/or documentation for each bold entry to represent actual or estimated amounts. You may be requested to provide additional information if not complete. You will receive an award revision email if an adjustment can be made.

	Summer Term (8 wks. June – Aug)	Fall Term (4 mos. Aug – Dec)	Spring Term (4 mos. Jan – May)
Tuition:	\$	\$	\$
Books and Supplies: (If more than \$200/semester)	\$	\$	\$
Medical/Dental:	\$	\$	\$
Child Care:	\$	\$	\$
Rent/Mortgage payment:	\$	\$	\$
Utilities: Gas	\$	\$	\$
Electric	\$	\$	\$
Water	\$	\$	\$
Board (food):	\$	\$	\$
Transportation: (Dollars spent per week on the X weeks in term)	\$ ransportation	\$	\$
TOTAL:	\$	\$	\$

Each person signing this worksheet certifies that all of the information reported on it is complete and correct. The student and spouse (if married) must sign.

Student Signature (Required) Date

Spouse Signature (Required If Married) Date

Please Include Student Name & NTC Student ID # AND

MAIL/RETURN TO: OR Northcentral Technical College Financial Aid Office Attn: Financial Aid 1000 W Campus Drive Wausau WI 54401-1899 FAX TO: 715.301.2904