

New York University *A private university in the public service*

School of Law Student Financial Services

245 Sullivan Street, 4th Floor New York, NY 10012 Telephone: (212) 998-6050 Facsimile: (212) 995-4525 E-mail: law.finaid@nyu.edu

REQUEST FOR BUDGET INCREASE FORM

READ: IMPORTANT INFORMATION AND REQUIREMENTS FOR COMPLETING THIS FORM

- 1. This form must be completed *in its entirety* by all students requesting an adjustment to the federal Student Budget (Budget).
- 2. DO NOT LEAVE ANY BLANKS EMPTY ON THIS FORM. If you believe an item on the form is inapplicable to your situation, enter N/A in the blank.
- 3. Unless otherwise indicated, all financial information must represent the *average monthly amount*.
- 4. Federal regulations set forth the elements contained in the Budget. Generally, the regulations only permit increases to the Budget for *education-related expenses of the student*.
- 5. The Budget is designed to reflect a student's estimated cost of attendance and *student* lifestyle.
- 6. Revolving debt is not an education-related expense and, therefore, a request based solely thereon will be denied. However, information regarding your revolving debt is requested below to gain a better understanding of your financial situation.
- 7. You must attach documentation supporting your request for a budget increase.
- 8. If the reason for your request is due to a computer purchase, attach copy of proof of purchase.
- 9. If your request is for housing expenses and you are living *off-campus*, attach a complete and fully executed copy of your rental agreement. Additionally, individuals living off-campus must attach copies of all utility bills, including, but not limited to, electric, gas, phone, and cable.
- 10. If you live on-campus, it is unnecessary to submit further housing documentation.
- 11. Except for a budget increase for a one-time computer expense, all other approved budget increases are *excluded* from benefit calculations for purposes of the Loan Repayment Assistance Program (LRAP).
- 12. Notwithstanding the information and documentation you provide in your request, we may require additional, clarifying information from you.

REQUEST FOR BUDGET INCREASE FORM

PART I: STUDENT INFORMATION

Name:	NYU ID #: N	
E-mail Address:	_Telephone	
Class Level: (circle one) 1L 2L 3L I	LLM Expected Grad Date	
I will be enrolled at the School of La YesNo	aw for the full academic year during 20 to	20?
Have you borrowed to the maximum of the	e federal Student Budget? Yes No	

PART II: AMOUNT OF AND BASIS FOR REQUEST

(Please explain in detail below or attach supplemental narrative)

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Amount of Budget Increase Requested: \$		
NARRATIVE		
LIST OF DOCUMENT(S) SUBMITTED WITH THIS APPLICATION		

PART III: STUDENT'S EDUCATION-RELATED EXPENSES WORKSHEET

NOTE: As indicated above, if you believe an item is inapplicable, you must enter "N/A." Do not leave any blanks. For shared expenses, please indicate only the portion paid for by you.				
Housing Type: On Campus Off Campus				
• Apartment Type (off-campus only): □ Studio □ 1 BR □ 2 BR □ 3 BR				
Monthly Rent: \$(off-campus housing only)				
Housing Per semester: \$(on-campus housing only)				
 Do you share living expenses with others? Yes No 				
• If yes, list name(s) of other(s) and relationship (attach supplemental narrative, if necessary):				
1. 3.				
2. 4.				
STUDENT'S LIVING EXPENSES (9-month Academic Year)				
Expenses	Average Monthly Cost			
1. Dormitory/Rent/Mortgage (off-campus attach lease)	\$			
2. Utilities (attach copies of utility bills)	\$			
3. Food	\$			
4. Clothing & Laundry	\$			
5. Personal Care Needs	\$			
6. Medical and Dental Care (attach documentation				
supporting items not covered by insurance)	\$			
7. Prescriptions/Co-payments (attach documentation				
supporting items not covered by insurance)	\$			
8. Revolving Debt (i.e., credit cards, car loans, etc;				
attach copies of statements)	\$			
9. Transportation	\$			
10. Child/dependent care (attach documentation supporting				
the expense)	\$			
11. Other (identify specifically and attach				
supporting documentation)	\$			
12. Other (identify specifically and attach				
supporting documentation)				
Total Average <u>Monthly</u> Expenses	\$			

<u>Please note: Moving expenses, security deposits and broker fees</u> <u>are not eligible education-related expenses.</u>		
Expense	Total One-time Cost	
1. Computer Purchase (including tax, hardware, software)	\$	
2. Transportation (airfare, travel home)	\$	
3. Clothing (winter clothing)	\$	
4. Medical Care	\$	
5. Dental Care (including one-time Fall charge for insurance)	\$	
6. Loan fees not included in the Student Expense Budget	\$	
7. Other (identify specifically and attach		
supporting documentation)	\$	
8. Other (identify specifically and attach		
supporting documentation)	\$	

I certify, to the best of my knowledge, the information provided on this application is complete and accurate. I acknowledge the Office of Student Financial Services may request additional documentation in support of this application. I also acknowledge that my request for a budget increase will not be processed if I fail to immediately fully comply with a request from the Office of Student Financial Services for additional supporting documentation.

Signature: _____ Date: _____

DO NOT WRITE BELOW THIS LINE

FOR OFFICE USE ONLY	
Date Received:	
Determination:	
Date Reviewed:	
Student Notified Date/Via:	
Signature of Reviewer:	